03/26/2011 11:18

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For Ot	her Than An A	uthorized Com	mittee		Office Use Only	
NAME OF COMMITTEE (in full)		EC MAILING LABE	L Example:If to				
Illinois Republican P	arty						
					1 1 1 1 1		
ADDRESS (number and st	reet) P.O.	Box 64897					
Check if different than previously reported. (ACC)	. Chic	ago				60664	
2. <b>FEC IDENTIFICATI</b>	ON NUMBER	<b>\</b>	CITY A		STATE	ZIPCOD	E 🛕
C00005926		3.	IS THIS REPORT	NEW (N) OR	X AME	ENDED	
4. TYPE OF REPOR (Choose One)  (a) Quarterly Report April 15 Quarterly F Quarterly F Quarterly F Quarterly F Quarterly F January 31 Quarterly F July 31 Mic Report(No Year Only) Terminatio (TER)	Report(Q1) Report(Q2) Report(Q3) Report(YE) d-Year n-election (MY)	(c) 12-Day PRE-Election Report for the:  Ele  (d) 30-Day Post -Electior Report for the:	ction on X Genera	tion (12C)	Sep 2	0 (M9) 0 (M10) 2G) in the State of	Special (30S)
5. Covering Period		14 2010	thro		22	2010	
I certify that I have examin Type or Print Name of Tre		nd to the best of my ve Syverson, Treasu	_	of it is true, correct	t and complete.		
Signature of Treasurer	Electronically Fi	led by Dave Syve	rson, Treasurer		Date 03	23	2011
NOTE : Submission of fa	lse, erroneous, or	r incomplete informa	tion may subject the	person signing th	nis Report to the p	penalties of 2 U.S	.C 437g.
Office Use						FEC FORM	

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 534

Write or Type Committee Name Illinois Republican Party

FEC Form 3X (Rev. 02/2003)

_	Report Covering the Period: From: 10	14 2010	To: 11 22 2010
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 $20^{\text{Y}}10^{\text{Y}}$		115300.74
	(b) Cash on Hand at Begining of Reporting Period	319959.40	
	(c) Total Receipts (from Line 19)	804963.01	2347715.28
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1124922.41	2463016.02
7.	Total Disbursements (from Line 31)	1086935.02	2425028.63
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37987.39	37987.39
9.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 534

Write or Type Committee Name Illinois Republican Party

Report Covering the Period:

From:

D D 14

2010

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Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	contributions (other than loans) From:  a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	82052.00	382567.00
	(ii) Unitemized	41547.26	285136.74
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	123599.26	667703.74
(k		0.00	500.00
(0	(such as PACs)	351723.00	796139.58
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	475322.26	1464343.32
	ransfers From Affiliated/Other arty Committees	256682.32	567031.43
3. A	Il Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(0	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other colitical Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	5000.00	5000.00
	ransfers from Non-Federal and Levin Funds		
(8	a) Non-Federal Account (from Schedule H3)	67958.43	311340.53
(k	b) Levin Funds (from Schedule H5)	0.00	0.00
(c	c) Total Transfer (add 18(a) and 18(b)).	67958.43	311340.53
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	804963.01	2347715.28
	otal Federal Receipts ubtract Line 18(c) from Line 19)	737004.58	2036374.75

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	14812.51	105221.48
	(ii) Non-Federal Share	55723.29	395832.23
	(b) Other Federal Operating Expenditures	80561.63	447136.65
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	151097.43	948190.36
	Transfers to Affiliated/Other Party Committees Contributions to	35000.00	35000.00
	Federal Candidates/Committeesand Other Political Committees	800.00	5800.00
	Independent Expenditure (use Schedule E)	0.00	0.00
-0.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
-0.	(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	25000.00	25000.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	25000.00	30000.00
29.	Other Disbursements	5100.00	10247.00
30.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	869937.59	1395791.27
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	869937.59	1395791.27
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1086935.02	2425028.63
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	1031211.73	2029196.40

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 534

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	475322.26	1464343.32
34.	Total Contribution Refunds (from Line 28(d))	25000.00	30000.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	450322.26	1434343.32
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	95374.14	552358.13
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	95374.14	552358.13

FE6AN026

Transaction	ID:	SL
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	E OF COMMITTEE (In Full) s Republican Party		
NAME	E OF ACCOUNT N		
		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1.	RECEIPTS FROM PERSONS a. Itemized(Use Schedule L-A)	50000.00	50000.00
	b. Unitemized	0.00	0.00
	c. Total	50000.00	50000.00
2.	OTHER RECEIPTS	0.00	7500.00
3.	TOTAL RECEIPTS(Add Lines 1c and 2)	50000.00	57500.00
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
	a. Voter Registration	0.00	0.00
	b. Voter ID	0.00	0.00
	c. GOTV	0.00	0.00
	d. Generic Campaign	0.00	0.00
	e. Total	0.00	0.00
5.	OTHER DISBURSEMENTS	54566.76	54746.76
6.	TOTAL DISBURSEMENTS(Add Lines 4e and 5)	54566.76	54746.76
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	7640.00	320.00
8.	RECEIPTS(from Line 3)	50000.00	57500.00
9.	SUBTOTAL(Add Lines 7 and 8)	57640.00	57820.00
10.	DISBURSEMENTS(From Line 6)	54566.76	54746.76
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	3073.24	3073.24

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any per ne name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Illinois Republican Party		
Full Name (Last, First, Middle Initial) ABX Air PAC		Date of Receipt
Mailing Address 145 Hunter Dr		10 21 7 2010
City Wilmington	State Zip Code OH 45177	Transaction ID: 01130.C321770  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00238311	1000.00
Name of Employer	Occupation	Receipt
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) American Success PAC		Date of Receipt
Mailing Address 701 8th St NW Suite 500		11 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20001	Transaction ID: 01201.C323048  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00336644	1000.00
Name of Employer	Occupation	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Biggert for Congress		Date of Receipt
Mailing Address PO Box 637		10 21 2010
City Hinsdale	State Zip Code IL 60522-0637	Transaction ID: C321792  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00330241	10000.00
Name of Employer U.S. Government	Occupation Congresswoman	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	NOTE: TRANSFER
SUBTOTAL of Receipts This Page (optional)		12000.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  Illinois Republican Party	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Biggert for Congress Mailing Address PO Box 637  City Hinsdale  FEC ID number of contributing federal political committee.  Name of Employer U.S. Government  Receipt For: Primary Other (specify)	State Zip Code IL 60522-0637  C C00330241  Occupation Congresswoman  Aggregate Year-to-Date  20000.00	Date of Receipt  M M / 26 / 2010  Transaction ID: C321794  Amount of Each Receipt this Period  10000.00  Receipt  NOTE: TRANSFER
Full Name (Last, First, Middle Initial) Cantor for Congress Mailing Address PO Box 17813  City Richmond  FEC ID number of contributing federal political committee.	State Zip Code VA 23226-7813  C C00355461	Date of Receipt  M M M / D D M 28 2010  Transaction ID: C322864  Amount of Each Receipt this Period  5000.00  Receipt
Name of Employer  Receipt For:  Primary General Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼  5000.00	NOTE: TRANSFER
Full Name (Last, First, Middle Initial) Caterpillar Employees  Mailing Address Political Action Co 100 N.E. Adams S  City Peoria  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)		Date of Receipt  M M Z 1 Z 0 1 0  Transaction ID: 01130.C321769  Amount of Each Receipt this Period  5000.00  Receipt
SUBTOTAL of Receipts This Page (option	nal)	20000.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee	son for the purpose of soliciting contributions
Illinois Republican Party		
Full Name (Last, First, Middle Initial) CNA Citizens For Good Govt - State PAC		Date of Receipt
Mailing Address 333 S Wabash Ave		10 27 2010
City	State Zip Code	Transaction ID: 01130.C321778
Chicago	IL 60604-4107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00078287	5000.00
Name of Employer	Occupation	Receipt
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	7
Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car Company	0 0 0 0 0 0 0 0	Date of Receipt
Mailing Address Political Action Comn 600 Coporate Park Di		10 27 2010
City	State Zip Code	Transaction ID: 01130.C321781
Saint Louis	MO 63105	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00219642	5000.00
Name of Employer	Occupation	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) ExelonPAC		Date of Receipt
Mailing Address P.O. Box 805379		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C322861
Chicago	IL 60680-5379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00141218	5000.00
Name of Employer	Occupation	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
SUBTOTAL of Receipts This Page (optional).	I	15000.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16 17
A	ny information copied from such Reports and Si r for commercial purposes, other than using the	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
۷.	Full Name (Last, First, Middle Initial) Friends Of John Boehner		Date of Receipt
	Mailing Address 7908 Cincinnati Daytor Suite 1		11 1 15 2010
	City West Chester	State Zip Code OH 45069	Transaction ID: 01201.C323049  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00237198	2000.00
	Name of Employer	Occupation	Receipt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2000.00	
— В.	Full Name (Last, First, Middle Initial) Generation Y Fund Gop Mailing Address PO Box 10555		Date of Receipt
		7. 0. 1	10 15 2010
	City Peoria	State Zip Code IL 61612	Transaction ID: 01130.C321775  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00448191	5000.00
	Name of Employer	Occupation	Receipt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	
 C.	Full Name (Last, First, Middle Initial) Growth And Prosperity PAC		Date of Receipt
	Mailing Address 831 Linwood Ct		1 1 1 5 / Y Y Y Y Y
	City	State Zip Code	Transaction ID: 01201.C323045
	Birmingham  FEC ID number of contributing federal political committee.	AL 35222 C C00388793	Amount of Each Receipt this Period  1000.00
	Name of Employer	Occupation	Receipt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3000.00	
	SUBTOTAL of Receipts This Page (optional)		8000.00
	FOTAL This Period (last page this line number of		•

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16 1
0	any information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	Illinois Republican Party		
	Full Name (Last, First, Middle Initial) HALPAC		Date of Receipt
	Mailing Address Hal Rogers, Honorary 701 8th St NW	Chair	11 15 2010
	City	State Zip Code	Transaction ID: 01201.C323044
	Washington FEC ID number of contributing federal political committee.	DC 20001 C C00376038	Amount of Each Receipt this Period  1000.00
	Name of Employer	Occupation	Receipt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	
_	Full Name (Last, First, Middle Initial) Home Depot Inc		Date of Receipt
	Mailing Address 101 Constitution Ave N	IW	10 27 Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 01130.C321783
	Washington	DC 20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00284885	5000.00
	Name of Employer	Occupation	Receipt
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	5000.00	
	Full Name (Last, First, Middle Initial) Jobs, Economy & Budget Fund		Date of Receipt
	Mailing Address Congressman Jeb Hen 7315 Wisconsin Ave	sarling	M M / D D / Y Y Y Y Y Y 1 1 1 1 5 2 0 1 0
	City	State Zip Code	Transaction ID: 01201.C323047
	Bethesda FEC ID number of contributing federal political committee.	MD 20814 C C00420695	Amount of Each Receipt this Period 2500.00
	Name of Employer	Occupation	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
	SUBTOTAL of Receipts This Page (optional)		8500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16 1
Ai or	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any per- e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
	Full Name (Last, First, Middle Initial) Kinzinger for Congress		Date of Receipt
	Mailing Address P.O. Box 1050		10 18 7 2010
	City	State Zip Code	Transaction ID: C322858
	Bourbonnais	IL 60914	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00458877	25000.00
	Name of Employer	Occupation	Receipt
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	25000.00	NOTE: TRANSFER
	Full Name (Last, First, Middle Initial) Kinzinger for Congress	1	Date of Receipt
	Mailing Address P.O. Box 1050		1 1 D D / Y Y Y Y Y 1 1 1 1 2 0 1 0
	City	State Zip Code	Transaction ID: C322859
	Bourbonnais	IL 60914	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00458877	5000.00
	Name of Employer	Occupation	Receipt
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	30000.00	NOTE: TRANSFER
_	Full Name (Last, First, Middle Initial) Kirk for Senate	<u> </u>	Date of Receipt
	Mailing Address PO Box 8		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: C322860
	Winnetka	IL 60093-0008	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00350785	190000.00
	Name of Employer Occupation		Receipt
	Receipt For:  Primary  General	Aggregate Year-to-Date ▼	NOTE: TRANSFER
	Other (specify)	455308.68	NOTE: TRANSFER
	SURTOTAL of Receipts This Page (optional)		220000.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions
Illinois Republican Party		
Full Name (Last, First, Middle Initial) Pac Associated Builders		Date of Receipt
Mailing Address 4250 N Fairfax Dr 9th Floor		10 15 2010
City	State Zip Code	Transaction ID: C321789
Arlington	VA 22203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C30001333	5000.00
Name of Employer	Occupation	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) The Freedom Project		Date of Receipt
Mailing Address 631-B Pennsylvania	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: C322865
Washington	DC 20003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00305805	5000.00
Name of Employer	Occupation	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	5000.00	
Full Name (Last, First, Middle Initial) The Freedom Project		Date of Receipt
Mailing Address 631 B Pennsylvania A	11 15 2010	
City	State Zip Code	Transaction ID: 01201.C323050
Washington	DC 20003	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00305805	5000.00
Name of Employer	Occupation	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
SUBTOTAL of Receipts This Page (optional)		15000.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 534 (check only one)  11a 11b X 11c 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per- ne name and address of any political committee	son for the purpose of soliciting contributions
lllinois Republican Party		
Full Name (Last, First, Middle Initial) Tim Murphy For Congress		Date of Receipt
Mailing Address PO Box 24551		11 1 15 2010
City Pittsburgh	State Zip Code PA 15234	Transaction ID: 01201.C323046
FEC ID number of contributing federal political committee.	C C00372201	Amount of Each Receipt this Period  1000.00
Name of Employer	Occupation	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Tuesday Group Political Action Committee		Date of Receipt
Mailing Address PO Box 11586	10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 01130.C321782
Washington	DC 20008-0786	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00433060	5000.00  Receipt
Name of Employer	Occupation	riescipi
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial) United Parcel Service, Inc PAC		Date of Receipt
Mailing Address 55 Glenlake PKWY N	NE .	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 01130.C321777
Atlanta FEC ID number of contributing	GA 30328	Amount of Each Receipt this Period
federal political committee.	<b>C</b> C00064766	5000.00 Receipt
Name of Employer	Occupation	ι ισυσιμι
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	5000.00	
SUBTOTAL of Receipts This Page (optional)		11000.00

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 15 / 534
	· · · · · · · · · · · · · · · · · · ·		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 12
			Detailed Guillinary Fage	13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) Volunteers for Shimkus			Date of Receipt
	Mailing Address PO Box 661			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 01130.C321767
	Springfield	IL	62705-0661	Amount of Each Receipt this Period
	FEC ID number of contributing			40000.00
	federal political committee.	C Coo	258855	40000.00
	Name of Employer	Occupation	<u> </u>	Receipt
	Name of Employer			
	Receipt For:	- Aggregate	Year-to-Date <b>V</b>	
	Primary General	33 -3		NOTE: TRANSFER
	Other (specify) ▼	0 0	69776.80	
В.	Full Name (Last, First, Middle Initial) Volunteers for Shimkus			Date of Receipt
	Mailing Address PO Box 661			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: C322934
	Springfield	IL	62705-0661	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> coo	258855	2223.00
	Name of Employer	Occupation	n	In-Kind
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 46999.80	Airfare - American Airlin- es

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	42223.00
TOTAL This Period (last page this line number only)	•	351723.00

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 534 (check only one)    X
Any information copied from su or for commercial purposes, oth NAME OF COMMITTEE (In Illinois Republican Part	ner than using the name and ac n Full)	ay not be sold or used by any personderess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd Paul Alongi Mailing Address 1 Bloom	le Initial) ningdale Pl. Apt. 702		Date of Receipt  1 0 2 7 2 0 1 0
City  Bloomingdale  FEC ID number of contribut	State IL	Zip Code 60108-1294	Transaction ID: C322325  Amount of Each Receipt this Period  250.00
Name of Employer MAAC Machinery Corp  Receipt For: Primary Gen Other (specify)	Occupati Executiv Aggregat		Receipt
Full Name (Last, First, Midd Timothy Andres Mailing Address 425 Kur City	le Initial) ngs Way State	Zip Code	Date of Receipt  10 25 2010  Transaction ID: 01130.C322676
Joliet  FEC ID number of contribut federal political committee.	IL C	60435-5393	Amount of Each Receipt this Period  60.00  Receipt
Name of Employer Joliet Catholic Academy  Receipt For:  Primary Gen  Other (specify) ▼			]
Full Name (Last, First, Midd Ronald Arras Mailing Address RR 2 Bo			Date of Receipt
City  Greenfield  FEC ID number of contribut federal political committee.	State IL C	Zip Code 62044-9628	Transaction ID: 01130.C322947  Amount of Each Receipt this Period  100.00
Name of Employer Self-Employed  Receipt For:  Primary Gen  Other (specify) ▼	00 0	te Year-to-Date ▼ 215.00	Receipt
SUBTOTAL of Receipts This	Page (optional)		410.00

A. Full N Heler Mailin City Bem FEC feder Nam None Rece  Full N Mailin City Win FEC feder Naminone	ommercial purposes, other than using the rate of COMMITTEE (In Full) DIS Republican Party  Name (Last, First, Middle Initial) In Ayers Ing Address 724 E 1000 North Rd	name and add	lress of any political cómmittee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
A. Heler Mailin City Berr FEC feder Nam None Rece Mailin City Win FEC feder Nam Child	n Ayers			
Full Naminos Section S	724 L 1000 NOITH RU			Date of Receipt
Full Name None  Rece  Garl Mailin  City  Win  FEC  feder  Name Child		State	Zip Code	Transaction ID: 01130.C321666
Rece Sa. Full Naminos Rece Gard Mailin City Win FEC feder Naminos	ID number of contributing	C	61813-3715	Amount of Each Receipt this Period  100.00
Full None Rece  B. Carl I  Mailin  City  Win  FEC feder  Nam Child	ral political committee.  e of Employer	Occupation		Receipt
B. Carl I Mailin City Win FEC feder Nam Child		Housewif		
Win FEC feder Nam Child	Name (Last, First, Middle Initial) Backer ng Address 1106 Sunset Road			Date of Receipt  1 0 2 7 2 0 1 0
FEC feder Nam Child		State	Zip Code	Transaction ID: C322815
feder Name Child	netka	IL	60093-3626	Amount of Each Receipt this Period
Child	ID number of contributing ral political committee.	С		150.00
al	e of Employer drens Memorial Hospit-	Occupation Physician		Receipt
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
C. Kevir	Name (Last, First, Middle Initial) n Baer ng Address 5405 138th PI			Date of Receipt
City		State	Zip Code	1 0 2 5 2 0 1 0  Transaction ID: C322080
•	stwood	IL	60445-1624	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		100.00
Name CC I	e of Employer ndustries	Occupation Accounta		Receipt
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
SUBTO	DTAL of Receipts This Page (optional)			350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Illinois Republican Party	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Wayne Behrns Mailing Address P.O. Box 14  City Dieterich  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code IL 62424-0014  C  Occupation Production Agriculture  Aggregate Year-to-Date  280.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John Benn  Mailing Address 1613 W Adams St  City Springfield  FEC ID number of contributing federal political committee.  Name of Employer IL Dept. of Revenue  Receipt For: Primary General Other (specify)	State Zip Code IL 62704-1503  C Occupation Revenue Officer Aggregate Year-to-Date  270.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) John Betts  Mailing Address 2500 Indigo Ln Unit 35  City Glenview  FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: Primary General Other (specify)	State Zip Code IL 60026-8307  C Occupation Retired Aggregate Year-to-Date  420.00	Date of Receipt    M M
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	190.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 534   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) William Boyd			Date of Receipt
Mailing Address 3145 Elmhurst Dr.			10 25 2010
City Springfield	State IL	Zip Code 62704-5474	Transaction ID: 01130.C321622  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer None	Occupation Retired	n	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) John Branz			Date of Receipt
Mailing Address PO Box 575			10 25 2010
City Herscher	State IL	Zip Code 60941-5009	Transaction ID: 01130.C322477
FEC ID number of contributing federal political committee.	C	00341-3009	Amount of Each Receipt this Period  130.00
Name of Employer None	Occupation Retired	n	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial) Mary Ellen Brown			Date of Receipt
Mailing Address 26 Chateau Dr			10 27 2010
City Fairview Heights	State IL	Zip Code 62208-3605	Transaction ID: C322363  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3223 0000	50.00
Name of Employer Information Requested	Occupation Informati	n on Requested	Receipt
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (options	al)		280.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
2	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Illinois Republican Party		-
	Full Name (Last, First, Middle Initial) Gregory Buffington		Date of Receipt
	Mailing Address 1787B Glenwood Cir.		10 29 2010
	City Sugar Grove	State Zip Code IL 60554-2017	Transaction ID: 01130.C321757  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer Layne-Western Co	Occupation General Manager	Receipt
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 650.00	
-	Full Name (Last, First, Middle Initial) Ronald D. Bullock		Date of Receipt
	Mailing Address 8 Blanchard Cir		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 01130.C322972
	South Barrington	IL 60010-9515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Bison Gear & Engineering	Occupation Chairman & CEO	Receipt
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Other (specify)	1000.00	
_	Full Name (Last, First, Middle Initial) Jon Carlson		Date of Receipt
	Mailing Address 38 Tartan Lakes Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: C322235
	Westmont  FEC ID number of contributing federal political committee.	IL 60559-6161	Amount of Each Receipt this Period 250.00
	Name of Employer Topi Capitol Mgt., LLC	Occupation Investment Management	Receipt
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  400.00	
Γ			1350.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 534 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Illinois Republican Party		
Full Name (Last, First, Middle Initial) Henry Chandler		Date of Receipt
Mailing Address 902 N Green Bay		10 27 2010
City	State Zip Code	Transaction ID: C322333
Lake Forest	IL 60045-1736	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer None	Occupation Retired	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) James Claxton		Date of Receipt
Mailing Address 9800 Hillcrest Ln		10 25 7 2010
City	State Zip Code	Transaction ID: C322221
Benton	IL 62812	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) John Conrad		Date of Receipt
Mailing Address 703 Orchard Dr.		10 25 2010
City	State Zip Code	Transaction ID: 01130.C321608
Macomb	IL 61455-1122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	110.00
Name of Employer Western Illinois Universi- ty	Occupation Professor	Receipt
Receipt For: Primary General	Aggregate Year-to-Date ▼	,
Other (specify) ▼	470.00	
SUBTOTAL of Receipts This Page (option	nal)	1610.00
	mber only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 534 (check only one)  X 11a 11b 11c 12 13 14 15 16
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per- e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
/	Full Name (Last, First, Middle Initial)		
	Theresa Couch  Mailing Address 3035 Lake Bluff Dr		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City Decatur	State Zip Code IL 62521-4834	Transaction ID: 01130.C321624  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Self-Employed	Occupation Investor	Receipt
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 400.00	
_	Full Name (Last, First, Middle Initial) Newton Dodds		Date of Receipt
	Mailing Address 19 Greencroft Dr.		10 25 2010
	City	State Zip Code	Transaction ID: 01130.C322450
	Champaign	IL 61821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00  Receipt
	Name of Employer Information Requested	Occupation Contractor	neceipt
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	400.00	
_	Full Name (Last, First, Middle Initial) Garth Dorcy		Date of Receipt
	Mailing Address 8933 Old Lebanon Tro		10 25 2010
	City <u>Lebanon</u>	State Zip Code  IL 62254-2017	Transaction ID: C321829  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer State of Illinois	Occupation Correctional Officer	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	
	SUBTOTAL of Receipts This Page (optional) .		450.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 534 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
(	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Illinois Republican Party	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<b>∠</b> A.	Full Name (Last, First, Middle Initial) Denis Drennan Mailing Address 4 Milburn Park  City Evanston  FEC ID number of contributing federal political committee.  Name of Employer DM Systems  Receipt For: Primary General Other (specify)	State Zip Code IL 60201-1744  C  Occupation Executive  Aggregate Year-to-Date   400.00	Date of Receipt    M M M
_ B.	Full Name (Last, First, Middle Initial) Sandra Drury  Mailing Address 1501 E. Prairie Ave  City  Wheaton  FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For:  Primary  General  Other (specify)	State Zip Code IL 60187  C  Occupation Housewife  Aggregate Year-to-Date  10000.00	Date of Receipt  M M / D D / Y Y Y Y Y Y  1 0 Z 0 Z 0 1 0  Transaction ID: C321791  Amount of Each Receipt this Period  10000.00  Receipt
_ C.	Full Name (Last, First, Middle Initial) Michael Dyer Mailing Address 952 Stone Creek Ln  City Belleville  FEC ID number of contributing federal political committee.  Name of Employer self  Receipt For: Primary General Other (specify)	State Zip Code IL 62223-2648  C Occupation Surgeon Aggregate Year-to-Date  1000.00	Date of Receipt  M M / D D / Y Y Y Y Y  1 0 2 5 2 0 1 0  Transaction ID: C322220  Amount of Each Receipt this Period  1000.00  Receipt
	SUBTOTAL of Receipts This Page (optional)		11200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 534 (check only one)    X
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) David Eades			Date of Receipt
	Mailing Address 5 Lyndhurst Pl.	State	Zip Code	10 / 27 / 2010
	City Champaign	IL	61820-7712	Transaction ID: C322309  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01020-1712	500.00
	Name of Employer Regency Assoc.	Occupation		Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	
— В.	Full Name (Last, First, Middle Initial) Ervin Erdoes			Date of Receipt
	Mailing Address 3740 Lake Shore Drive	e, #15-A		10 25 2010
	City	State	Zip Code	Transaction ID: 01130.C322481
	Chicago	<u> L</u>	60613-4201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer University of Illinois	Occupation Professor		Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 285.00	
 с.	Full Name (Last, First, Middle Initial) Thomas Faller			Date of Receipt
	Mailing Address 3300 Hedley Rd			10 27 YYYY 2010
	City	State	Zip Code	Transaction ID: C322137
	Springfield	<u>IL</u>	62711-6384	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00 Receipt
	Name of Employer Information Requested	<del>, '</del>	on Requested	ιτευσιμι
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_
	Primary ☐ General Other (specify) ▼		220.00	
s	UBTOTAL of Receipts This Page (optional)	1		750.00
	OTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 534 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full) Illinois Republican Party	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Patricia Fee		Date of Receipt
Mailing Address 1530 White Eagle Dr		10 27 2010
City Naperville	State Zip Code  IL 60564-9761	Transaction ID: C322836
FEC ID number of contributing federal political committee.	IL 60564-9761	Amount of Each Receipt this Period 200.00
Name of Employer Self-Employed	Occupation political consultant	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1175.00	
Full Name (Last, First, Middle Initial) Thomas Fitzgibbon		Date of Receipt
Mailing Address 9640 Reding Cir	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: C322171
Des Plaines	IL 60016-1551	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer None	Occupation Retired	Receipt
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	_
Other (specify)	310.00	
Full Name (Last, First, Middle Initial) William Frame		Date of Receipt
Mailing Address 959 Malinda Ct		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C322277
Forsyth	IL 62535-9637	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00  Receipt
Name of Employer AAD LTD.	Occupation Physician	Поосірі
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	
SUBTOTAL of Receipts This Page (optional)		400.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A 0	r for commercial purposes, other than using th	Statements may not be sold or used by any pers e name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
۷.	Full Name (Last, First, Middle Initial) Ronald Fraser		Date of Receipt
	Mailing Address 2003 Cherokee Rd		10 25 2010
	Corportorovillo	State Zip Code IL 60110-1263	Transaction ID: C321842
	Carpentersville  FEC ID number of contributing federal political committee.	IL 60110-1263	Amount of Each Receipt this Period 200.00
	Name of Employer None	Occupation Retired	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
 3.	Full Name (Last, First, Middle Initial) Brian Gaston		Date of Receipt
	Mailing Address 919 Bernard St	10 27 2010	
	City	State Zip Code	Transaction ID: 01130.C321780
	Alexandria	VA 22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00 Receipt
	Name of Employer Glover Park Group	Occupation Government AFFA	T toosipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
· –	Full Name (Last, First, Middle Initial) Marion Giles		Date of Receipt
	Mailing Address 152 Brewster Lane		10 25 2010
	City	State Zip Code	Transaction ID: 01130.C322675
	La Grange Park	IL 60526-6004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00  Receipt
	Name of Employer Information Requested	Occupation Information Requested	ι ισοσιμι
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  255.00	
			550.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Illinois Republican Party	statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Alexander Goldin Mailing Address 2374 Greenview Rd  City Northbrook  FEC ID number of contributing federal political committee.  Name of Employer Ear, Nose, & Throat Center  Receipt For:	State Zip Code IL 60062-1157  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt    M M M
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) August Greidanus  Mailing Address 501 Cutters Mill Ln	220.00	Date of Receipt  1 0 2 5 2 0 1 0
City Schaumburg FEC ID number of contributing	State Zip Code IL 60194-4534	Transaction ID: C322219  Amount of Each Receipt this Period
Federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	Occupation Part-time Consultant Aggregate Year-to-Date  1050.00	Receipt
Full Name (Last, First, Middle Initial) James Griseto  Mailing Address 1 Oak Brook Club Dr A	Not P201	Date of Receipt
City Oak Brook	State Zip Code IL 60523-8605	1 0 2 7 2 0 1 0 Transaction ID: C321914
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  25.00
Name of Employer None  Receipt For:  Primary General  Other (specify) ▼	Occupation Retired  Aggregate Year-to-Date   250.00	Receipt
SUBTOTAL of Receipts This Page (optional)		570.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Illinois Republican Party	tatements may not be sold or used by any pe name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) John Hagenah Mailing Address 1101 Greenwood Ave.  City Wilmette  FEC ID number of contributing federal political committee.	State Zip Code IL 60091-1619  C	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Name of Employer Self-Employed  Receipt For:  Primary General  Other (specify) ▼	Occupation Architect  Aggregate Year-to-Date   500.00	Receipt
-	Full Name (Last, First, Middle Initial) John Hardick Mailing Address 6025 N Rockwell St		Date of Receipt
	City	State Zip Code	Transaction ID: C322217
	Chicago	IL 60659-4006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer None	Occupation Retired	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
_	Full Name (Last, First, Middle Initial) Paul Harvey		Date of Receipt
	Mailing Address 2994 Grant St		1 0 2 7 2 0 1 0
	City	State Zip Code	Transaction ID: C322847
	Evanston	IL 60201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer UBS	Occupation Investments	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		1150.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 534 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Illinois Republican Party	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Denise Henry Mailing Address 7400 Park Terrace D  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)	r  State Zip Code VA 22307  C  Occupation Information Requested  Aggregate Year-to-Date ▼  5000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Joel Hertz Mailing Address PO Box 467  City Monticello  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary Other (specify)	State Zip Code IL 61856-0467  C  Occupation Information Requested  Aggregate Year-to-Date   300.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) William Heyen Mailing Address 15528 Route 16  City Gillespie  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code IL 62033-3370  C  Occupation Farmer  Aggregate Year-to-Date  320.00	Date of Receipt  M M / D D / Y Y Y Y Y  1 0
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	5260.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 534 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Illinois Republican Party			
Full Name (Last, First, Middle Initial)  Jessie Hill			Date of Receipt
Mailing Address 1924 W. Ashbury Ln.			11 09 2010
City Inverness	State IL	Zip Code 60067-4796	Transaction ID: C322900  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		110.00
Name of Employer None	Occupation Retired	n	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Richard Hutchison	_ <b>!</b>		Date of Receipt
Mailing Address 16249 E 350th St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Orion	State IL	Zip Code 61273-9173	Transaction ID: C322054  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Self-Employed	Occupation Psycholo		Receipt
Receipt For:  Primary General  Other (specify) ▼	, ' · · ·	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Richard Hutchison			Date of Receipt
Mailing Address 16249 E 350th St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Orion	State IL	Zip Code	Transaction ID: 01130.C322939
FEC ID number of contributing federal political committee.	C	61273-9173	Amount of Each Receipt this Period  100.00
Name of Employer Self-Employed	Occupation Psycholo		Receipt
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	<del>-                                    </del>	Year-to-Date ▼ 700.00	
SUBTOTAL of Receipts This Page (optional)			410.00
TOTAL This Period (last page this line number	r only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Ar	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	Illinois Republican Party		
	Full Name (Last, First, Middle Initial) William Jenks		Date of Receipt
	Mailing Address 607 N Main St  City	State Zip Code	10 18 2010
	Glen Ellyn	IL 60137	Transaction ID: C322053  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Gartner	Occupation Vice President	Receipt
	Receipt For:  Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Calvin Johnson	ı	Date of Receipt
	Mailing Address 15055 W. 139th St.		10 25 7 2010
	City	State Zip Code	Transaction ID: C322115
	Homer Glen	IL 60491	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00  Receipt
	Name of Employer None	Occupation Retired	Πεσειρι
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
	Full Name (Last, First, Middle Initial) Ronald Jones		Date of Receipt
	Mailing Address 100 Arboretum Dr		10 25 / Y Y Y Y
	City North Parrington	State Zip Code IL 60010-6591	Transaction ID: 01130.C321635
	North Barrington  FEC ID number of contributing federal political committee.	C 60010-6591	Amount of Each Receipt this Period  200.00
	Name of Employer Chicago Turf and Irrigati- on	Occupation Retired	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
	UBTOTAL of Receipts This Page (optional)		500.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 534 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full) Illinois Republican Party		
Full Name (Last, First, Middle Initial) Richard Kavanagh		Date of Receipt
Mailing Address 401 Ashley Dr		11 09 2010
City New Lenox	State Zip Code  IL 60451-1165	Transaction ID: 01130.C322958  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Dykema Gossett Reoks Pitts	Occupation Attorney	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	
Full Name (Last, First, Middle Initial) Mike Klemm		Date of Receipt
Mailing Address 6500 Carlisle Bnd		M M / D D / Y Y Y Y Y 1 1 0 1 8 2 0 1 0
City	State Zip Code	Transaction ID: C322061
Springfield  FEC ID number of contributing federal political committee.	IL 62711-6794	Amount of Each Receipt this Period
Name of Employer Capitol City Speakers Bur- eau	Occupation President	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) Mike Klemm	<u> </u>	Date of Receipt
Mailing Address 6500 Carlisle Bnd		10 25 2010
City Covingfield	State Zip Code	Transaction ID: 01202.C323064
Springfield  FEC ID number of contributing federal political committee.	IL 62711-6794	Amount of Each Receipt this Period  100.00
Name of Employer Capitol City Speakers Bur- eau	Occupation President	Receipt
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .		300.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 534   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Illinois Republican Party		· ·	
Full Name (Last, First, Middle Initial) Mike Klemm			Date of Receipt
Mailing Address 6500 Carlisle Bnd			10 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Springfield	State IL	Zip Code 62711-6794	Transaction ID: C322842
FEC ID number of contributing federal political committee.	C	02711-0794	Amount of Each Receipt this Period  100.00
Name of Employer Capitol City Speakers Bur- eau	Occupation Presiden		Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Ronald Kramer	<b>I</b>		Date of Receipt
Mailing Address 2970 N Lake Shore Dr Apt 6B			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State IL	Zip Code 60657-5783	Transaction ID: C322004  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		110.00
Name of Employer Seyfarth Shaw	Occupation Attorney	n	Receipt
Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) Herbert Landers			Date of Receipt
Mailing Address 309 Pearl Ave.			1 0 2 5 2 0 1 0
City Loves Park	State IL	Zip Code 61111-5031	Transaction ID: 01130.C322445
FEC ID number of contributing federal political committee.	C	61111-5051	Amount of Each Receipt this Period  130.00
Name of Employer Information Requested	Occupation Information	n on Requested	Receipt
Receipt For:  Primary  General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		340.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 534 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
0	any information copied from such Reports and ir for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	lllinois Republican Party		
۷.	Full Name (Last, First, Middle Initial) Delbert Leppke		Date of Receipt
	Mailing Address 21 Calvin Cir		10 27 2010
	City Evanston	State Zip Code IL 60201-1911	Transaction ID: C322819  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1647.00
	Name of Employer None	Occupation Retired	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1727.00	
- 3.	Full Name (Last, First, Middle Initial) Edward Mack		Date of Receipt
	Mailing Address 481 Grove St.	10 25 2010	
	City	State Zip Code	Transaction ID: C322492
	Glencoe  FEC ID number of contributing federal political committee.	IL 60022-1881	Amount of Each Receipt this Period
	Name of Employer Mack & Parker, Inc.	Occupation Insurance- Retired	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
. –	Full Name (Last, First, Middle Initial) Edward Mack		Date of Receipt
	Mailing Address 1804 Creekside Ct		11 09 2010
	City	State Zip Code IL 60561	Transaction ID: 01130.C322941
	Darien  FEC ID number of contributing federal political committee.	IL 60561	Amount of Each Receipt this Period  1000.00
	Name of Employer None	Occupation Retired	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Γ	SUBTOTAL of Receipts This Page (optional)		2747.00

Full Name (Las William Manns Mailing Addres	purposes, other than using the MMITTEE (In Full) ublican Party st, First, Middle Initial) ss PO Box 427	State	at be sold or used by any persons of any political committee to	Date of Receipt  1 0 1 8 2 0 1 0
Full Name (Las William Manns Mailing Addres  City Burlington  FEC ID number	st, First, Middle Initial) ss PO Box 427 er of contributing	<u>IL</u>	Zip Code	M M / D D / Y Y Y Y
Mailing Addres  City  Burlington  FEC ID number	er of contributing	<u>IL</u>	Zip Code	M M / D D / Y Y Y Y
City Burlington FEC ID numbe	er of contributing	<u>IL</u>	Zip Code	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Burlington FEC ID number		<u>IL</u>	Zip Code	
FEC ID numbe			00100	Transaction ID: 01130.C321784
		C	60109	Amount of Each Receipt this Period 2000.00
Name of Empl St. Charles Tr	oyer ading	Occupation		Receipt
Receipt For:	General pecify) ▼	Aggregate Ye	ar-to-Date ▼ 2000.00	
Full Name (Las	st, First, Middle Initial)	Date of Receipt		
Mailing Addres	Mailing Address 27826 E. 1700 North Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: C321825
Saunemin		<u>IL</u>	61769-6013	Amount of Each Receipt this Period
federal politica	er of contributing I committee.	C		50.00  Receipt
Name of Employed	oyer I	Occupation Farmer		Πεσειρι
Receipt For: Primary Other (s	General pecify) ▼	Aggregate Ye	ear-to-Date ▼ 235.00	
Full Name (Las	st, First, Middle Initial)	Date of Receipt		
Mailing Addres	Mailing Address 10095 Lawyers Rd			M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City Vienna		State VA	Zip Code 22181	Transaction ID: 01130.C321740  Amount of Each Receipt this Period
	er of contributing I committee.	C	22101	500.00
Name of Empl Information Re	oyer equested	Occupation Information	Requested	Receipt
Receipt For: Primary Other (sp	☐ General pecify) ▼	Aggregate Ye	ar-to-Date ▼ 500.00	
SUBTOTAL of F	Receipts This Page (optional) .	1		2550.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 534 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the	person for the purpose of soliciting contributions ee to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) James Matson	Date of Receipt	
	Mailing Address 210 Exmoor Ave  City	State Zip Code	10 18 2010
	Glen Ellyn	IL 60137	Transaction ID: 01130.C321786  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	8000.00
	Name of Employer Information Requested	Occupation Information Requested	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 8000.00	
- В.	Full Name (Last, First, Middle Initial) George Maze	l	Date of Receipt
	Mailing Address 1710 2nd St.		10 27 7 2010
	City	State Zip Code	Transaction ID: C321898
	<u>Peru</u>	IL 61354	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer American Nickeloid	Occupation Information Requested	Receipt
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
- C.	Full Name (Last, First, Middle Initial) Jonathan McCarthy	Date of Receipt	
	Mailing Address 3531 N. Sheffield Ave.	M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1	
	City	State Zip Code	Transaction ID: 01130.C322943
	Chicago	IL 60657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	300.00
	Name of Employer IDEX Corporation	Occupation Tax manager	Receipt
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	300.00	
ſ	SUBTOTAL of Receipts This Page (optional)	ı	8550.00
-			
- 1	TOTAL This Period (last page this line number	O(1)(y)	<b>7</b>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	se separate schedule(s) each category of the stailed Summary Page	FOR LINE NUMBER: PAGE 37 / 534 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  Illinois Republican Party	Statements may not be name and address of	ne sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Michael McDonnell Mailing Address 1410 Forest Ave.			Date of Receipt  10 25 2010
City River Forest  FEC ID number of contributing federal political committee.		Zip Code 60305-1002	Transaction ID: 01130.C322686  Amount of Each Receipt this Period  70.00
Name of Employer Information Requested  Receipt For:  Primary General  Other (specify) ▼	Occupation Information Re Aggregate Year-	·	Receipt
Full Name (Last, First, Middle Initial) John McGovern Mailing Address 4147 Clausen Ave			Date of Receipt  1 1 0 9 2 0 1 0
City Western Springs  FEC ID number of contributing federal political committee.		Zip Code 60558-1230	Transaction ID: 01130.C322906  Amount of Each Receipt this Period  25.00
Name of Employer Information Requested  Receipt For:  Primary General  Other (specify) ▼	Occupation Information Re Aggregate Year-	•	Receipt
Full Name (Last, First, Middle Initial) Richard Meade  Mailing Address 702 Berry St			Date of Receipt
City Falls Church FEC ID number of contributing federal political committee.		Zip Code 22042	1 0 2 7 2 0 1 0  Transaction ID: 01130.C321776  Amount of Each Receipt this Period  250.00
Name of Employer B*K*S*H & Assoc  Receipt For:  Primary General Other (specify) ▼	Occupation Director Aggregate Year-	to-Date ▼ 250.00	Receipt
SUBTOTAL of Receipts This Page (optional)			345.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 534   (check only one)   X   11a		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Illinois Republican Party		,,,			
Full Name (Last, First, Middle Initial) Daniel Meyer			Date of Receipt		
Mailing Address 2506 Duxbury PI	·				
City	State	Zip Code	1 0 2 1 2 0 1 0 Transaction ID: 01130.C321768		
Alexandria  FEC ID number of contributing federal political committee.	C	22308	Amount of Each Receipt this Period  1000.00		
Name of Employer The Duberstein Group	Occupation Vice Pres		Receipt		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) Harvey Miller			Date of Receipt		
Mailing Address 485 East Half Day	Rd		10 25 2010		
City	State	Zip Code	Transaction ID: C322222		
Buffalo Grove  FEC ID number of contributing federal political committee.	C	60089	Amount of Each Receipt this Period  1000.00		
Name of Employer None	Occupation Retired	n	Receipt		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) David Mills			Date of Receipt		
Mailing Address 3455 14th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 01130.C322929		
Moline FEC ID number of contributing federal political committee.	C	61265	Amount of Each Receipt this Period 4000.00		
Name of Employer Information Requested	Occupation	n on Requested	Receipt		
Receipt For:  Primary General  Other (specify) ▼	<del>'</del>	e Year-to-Date ▼ 4000.00			
SUBTOTAL of Receipts This Page (optional			6000.00		

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  Any information copied from such Reports and Si	Use separate schedule(s) for each category of the Detailed Summary Page atements may not be sold or used by any per-	FOR LINE NUMBER: PAGE 39 / 534 (check only one)    X
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Illinois Republican Party	name and address of any political committee	to solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) John Munger  Mailing Address 14 Dukes Ln  City LincoInshire  FEC ID number of contributing federal political committee.  Name of Employer Jansson Shupe & Munger Ltd  Receipt For: Primary General Other (specify)	State Zip Code IL 60069-3320  C Occupation Attorney Aggregate Year-to-Date  300.00	Date of Receipt  M M O D D D Z D O D Z D O D D D D D D D D D
В.	Full Name (Last, First, Middle Initial) William Myers  Mailing Address 4106 Clubhouse Dr  City Champaign  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)	State Zip Code IL 61822  C Occupation Information Requested Aggregate Year-to-Date  1000.00	Date of Receipt  M M J D D D Z D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ С.	Full Name (Last, First, Middle Initial) John ORourke  Mailing Address 11028 Stanmore Dr  City Potomac  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)	State Zip Code MD 20854  C  Occupation Information Requested  Aggregate Year-to-Date   1000.00	Date of Receipt  M M M / 27 2010  Transaction ID: 01130.C321779  Amount of Each Receipt this Period  1000.00  Receipt
	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of		2100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16
, A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pe e name and address of any political committed	erson for the purpose of soliciting contributions to solicit contributions from such committee.
/	Illinois Republican Party		1
	Full Name (Last, First, Middle Initial) Edward D. Oldis Mailing Address 98 Windmill Road		Date of Receipt
	City	State Zip Code	1 0 2 5 2 0 1 0 Transaction ID: C322076
	Orland Park	IL 60467	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer A W Chesterton	Occupation Manager	Receipt
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  300.00	
_	Full Name (Last, First, Middle Initial) Vesselin Oreshkov		Date of Receipt
	Mailing Address 5200 Eagle Rdg		10 25 2010
	City	State Zip Code	Transaction ID: 01130.C321610
	Springfield	IL 62711-7812	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Sang. Assoc. Anesthesiolo- gist	Occupation Physician	Receipt
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	400.00	
_	Full Name (Last, First, Middle Initial) Peter Orum		Date of Receipt
	Mailing Address P.O. Box 384		10 27 2010
	City	State Zip Code	Transaction ID: C322404
	St. Charles	IL 60174-0384	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00  Receipt
	Name of Employer Self-Employed	Occupation General Manager	Πουσιρι
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
	NIDTOTAL of Descints This Dags (antional)		450.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 534 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persing the name and address of any political committee to	on for the purpose of soliciting contributions
Illinois Republican Party		
Full Name (Last, First, Middle Initial) Steven Pearson		Date of Receipt
Mailing Address 1 S 370 Winfield	Rd	10 29 2010
City Wheaton	State Zip Code IL 60187	Transaction ID: C322043
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  1000.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  B. Russell Perkinson	1	Date of Receipt
Mailing Address PO Box 65		10 25 2010
City Thawville	State Zip Code IL 60968-0065	Transaction ID: 01130.C322440  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer self	Occupation Producer	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Daniel Peterson	<b>'</b>	Date of Receipt
Mailing Address 1939 Burr Oak D	or W	10 29 2010
City Glenview	State Zip Code IL 60025-1803	Transaction ID: C322279
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  250.00
Name of Employer ZS Associates, Inc.	Occupation Marketing Consultant	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	onal)	1350.00
TOTAL This Period (last page this line n	umber only)	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 534 (check only one)    X   11a
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	Illinois Republican Party		
٠.	Full Name (Last, First, Middle Initial) Christopher Pfaff		Date of Receipt
	Mailing Address 7 Briar Lane  City	State Zip Code	1 0 2 5 2 0 1 0 Transaction ID: C322575
	Glencoe	IL 60022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer UBS	Occupation Financial Advisor	Receipt
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00	
- 3.	Full Name (Last, First, Middle Initial) Wilbur Pflum		Date of Receipt
	Mailing Address 117 Eldorado Drive		10 25 7 2010
	City	State Zip Code	Transaction ID: C321816
	Tuscola  FEC ID number of contributing federal political committee.	IL 61953	Amount of Each Receipt this Period  60.00
	Name of Employer None	Occupation Retired	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
	Full Name (Last, First, Middle Initial) Neil Pobanz		Date of Receipt
	Mailing Address PO Box 32		10 27 7 2010
	City	State Zip Code	Transaction ID: C322155
	Lacon FEC ID number of contributing federal political committee.	IL 61540-0032	Amount of Each Receipt this Period  100.00
	Name of Employer American Bonanza Society	Occupation Consultant	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Γ,	SUBTOTAL of Receipts This Page (optional)		285.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 534 (check only one)    X
ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Illinois Republican Party			
Full Name (Last, First, Middle Initial) Augustine Ponnezhan			Date of Receipt
Mailing Address 147 W. Cobblestone	Drive		M M / D D / Y Y Y Y Y Y 10 18 2010
City	State	Zip Code	Transaction ID: C322057
Crete	IL	60417-6305	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self-Employed	Occupatio Real Est		Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) John Powell			Date of Receipt
Mailing Address 1100 N Edgehill Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C322197
West Peoria	IL	61604-5134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		200.00 Receipt
Name of Employer None	Occupatio Retired	n	Πευειμι
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 320.00	]
Full Name (Last, First, Middle Initial) Linda Powers			Date of Receipt
Mailing Address 1323 W Pratt Blvd # 3	3		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C322036
Chicago	<u>IL</u>	60626-4336	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00  Receipt
Name of Employer CNA Corp.	<del>- '</del>	nent Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (optional) .			800.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 534 (check only one)    X
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Illinois Republican Party	statements may i name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>∠</u> <b>A</b> .	Full Name (Last, First, Middle Initial) Thomas Rakow  Mailing Address PO Box 545 2407 Tall Oaks Dr  City Elgin	State IL	Zip Code 60121-0545	Date of Receipt  10 18 2010  Transaction ID: 01130.C321785  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.  Name of Employer IHC Construction  Receipt For:  Primary  General  Other (specify)	Occupation Contractor Aggregate	Year-to-Date ▼	Receipt
33.	Full Name (Last, First, Middle Initial) Karl Rauschert  Mailing Address 24 Hillcrest Dr.  City  Bushnell  FEC ID number of contributing federal political committee.  Name of Employer MCP Corp.  Receipt For: Primary General Other (specify)	State IL  C  Occupation Manufactu  Aggregate	Zip Code 61422-9737 urer year-to-Date ▼ 3250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Full Name (Last, First, Middle Initial) John Reed Mailing Address 512 S Highland Ave  City Champaign  FEC ID number of contributing federal political committee.  Name of Employer M.J. Reed Co.  Receipt For: Primary General Other (specify)	State IL  C  Occupation President  Aggregate	Zip Code 61821-3913 Year-to-Date ▼ 500.00	Date of Receipt    M M M
	SUBTOTAL of Receipts This Page (optional)			4000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  ny information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 534 (check only one)    X
or	for commercial purposes, other than using the  NAME OF COMMITTEE (In Full)  Illinois Republican Party	name and address of any political committee	to solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Jane Reese Mailing Address 23976 Stragecoach Ro	pad	Date of Receipt
	City Geneseo	State Zip Code IL 61254	1 1 0 9 2 0 1 0  Transaction ID: 01130.C322930  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	5000.00  Receipt
	Name of Employer Information Requested  Receipt For:  Primary General  Other (specify) ▼	Occupation Information Requested  Aggregate Year-to-Date   5000.00	Песері
В.	Full Name (Last, First, Middle Initial) Scott Reichard Mailing Address 107 Meadow Dr		Date of Receipt
	City	State Zip Code	Transaction ID: 01130.C321773
	Urbana FEC ID number of contributing federal political committee.	IL 61801	Amount of Each Receipt this Period 500.00
	Name of Employer Benefit Planning Consulta- nts Receipt For: Primary General Other (specify)	Occupation CPA Aggregate Year-to-Date   500.00	Receipt
 C.	Full Name (Last, First, Middle Initial) Todd Ricketts Mailing Address 510 Laurel Ave		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 01130.C321705
	Wilmette FEC ID number of contributing federal political committee.	IL 60091	Amount of Each Receipt this Period 2500.00
	Name of Employer Ram Investment	Occupation President	Receipt
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
			8000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 534 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Illinois Republican Party	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Todd Ricketts  Mailing Address 510 Laurel Ave  City Wilmette  FEC ID number of contributing federal political committee.  Name of Employer Ram Investment  Receipt For: Primary General Other (specify)	State Zip Code IL 60091  C  Occupation President  Aggregate Year-to-Date  7500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jack Roeser  Mailing Address 522 Lake Shore Dr N  City Barrington  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed  Receipt For: Primary General Other (specify)	State Zip Code IL 60010-3524  C  Occupation Executive  Aggregate Year-to-Date   5000.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) Michael Romano  Mailing Address 644 Dalewood Ln  City Hinsdale  FEC ID number of contributing federal political committee.  Name of Employer None  Receipt For: Primary General Other (specify)	State Zip Code IL 60521-4732  C Occupation Retired Aggregate Year-to-Date ▼	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		11000.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Illinois Republican Party	tatements may no name and addres	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) David Ross Gray Mailing Address 216 Hawley Ln  City	State	Zip Code	Date of Receipt  10 29 2010  Transaction ID: C322042
	Geneva FEC ID number of contributing federal political committee.	C	60134	Amount of Each Receipt this Period  1000.00  Receipt
	Name of Employer self  Receipt For:  Primary General  Other (specify) ▼		s and futures par-to-Date ▼ 1000.00	neceipi
3.	Full Name (Last, First, Middle Initial) Robert Ryan Mailing Address 2026 N Newcastle Ave	)		Date of Receipt
	City	State	Zip Code	Transaction ID: C322059
	Chicago	<u>IL</u>	60707-3332	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00  Receipt
	Name of Employer TransUnion LLC	Occupation VP Governr	ment Relations	Πεσειρι
	Receipt For:  Primary  General  Other (specify)	Aggregate Ye		
	Full Name (Last, First, Middle Initial) Joshua Scheinfeld			Date of Receipt
	Mailing Address 107 South Ave			11 09 2010
	City Glencoe	State IL	Zip Code 60022-1718	Transaction ID: 01130.C323038  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00022 1710	100.00
	Name of Employer Self-Employed	Occupation Businessma	an	Receipt
	Receipt For:  Primary  General  Other (specify)	. •	ar-to-Date ▼ 310.00	
	SUBTOTAL of Receipts This Page (optional)	l		1200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16
Ai	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may nee name and addre	ot be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Illinois Republican Party			
	Full Name (Last, First, Middle Initial) Wilbur Schwark			Date of Receipt
	Mailing Address PO Box 1			10 29 2010
	City Bonfield	State IL	Zip Code	Transaction ID: C322234
	FEC ID number of contributing federal political committee.	C	60913-0001	Amount of Each Receipt this Period 25.00
	Name of Employer None	Occupation Retired		Receipt
	Receipt For:  Primary General  Other (specify) ▼	<del>-                                     </del>	ear-to-Date ▼ 205.00	
_	Full Name (Last, First, Middle Initial) Frank Schwermin			Date of Receipt
	Mailing Address 1646 Huntington Ln.			10 29 YYYY 2010
	City	State	Zip Code	Transaction ID: 01130.C321758
	Highland Park	<u>IL</u>	60035-2714	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer None	Occupation Retired		Receipt
	Receipt For:	Aggregate Yo	ear-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Irving Seaman			Date of Receipt
	Mailing Address 666 N Sheridan Rd.			10 25 2010
	City	State	Zip Code	Transaction ID: C322488
	Lake Forest  FEC ID number of contributing federal political committee.	C	60045-2341	Amount of Each Receipt this Period 250.00
	Name of Employer None	Occupation Retired	· · ·	Receipt
	Receipt For:  Primary General  Other (specify) ▼	<del>-                                     </del>	ear-to-Date ▼ 250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1		325.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of solding from the purpose of solding or for commercial purposes, other than using the name and address of any political committee to solicit contributions from some state of the purpose of solding the name and address of any political committee to solicit contributions from some state of the name and address of any political committee to solicit contributions from some state of the name and address of any political committee to solicit contributions from some state of the name and address of any political committee to solicit contributions from some state of the name and address of any political committee to solicit contributions from some state of the name and address of any political committee to solicit contributions from some state of the name and address of any political committee to solicit contributions from some state of the name and address of any political committee to solicit contributions from some state of the name and address of any political committee.  Name of Employer Information Information Pequested  Information Requested  Receipt Transaction ID: C3  Amount of Each Receipt Transaction ID: C3  Amount of Each Receipt Transaction ID: C4  Information ID: C4  I	PAGE 49 / 534  11c 12 15 16 17
A. Full Name (Last, First, Middle Initial)  J. Claylon Shaw  Mailing Address 1400 Paramount Pkwy  City  Batavia  FEC ID number of contributing federal political committee.  Name of Employer Information Requested Information Informa	citing contributions n such committee.
A. J. Clayron Shaw Mailing Address 1400 Paramount Pkwy  City Batavia FEC ID number of contributing federal political committee.  Name of Employer Information Requested Information Information Requested Information Requested Information Infor	
City Batavia    C	D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Information Requested Receipt For:    Primary   General   Aggregate Year-to-Date ▼     Primary   General   Date of Receipt	
Receipt   Rec	Receipt this Period
Receipt For:	2000.00
Primary General Other (specify) ▼	
Ann Steffenhagen  Mailing Address 28264 N Gilmer Rd  City State Zip Code  Mundelein IL 60060-9538  FEC ID number of contributing federal political committee.  Name of Employer Northern IL Mack Inc.  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) George Suter  Mailing Address 2580 Greenwood  City State Zip Code  Mailing Address 2580 Greenwood  City State Zip Code  DeKalb IL 60115  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Aggregate Year-to-Date ▼  Transaction ID: C3  Amount of Each Receipt  Date of Receipt  Receipt  Receipt  Aggregate Year-to-Date ▼  Transaction ID: C3  Amount of Each Receipt  Date of Receipt  Amount of Each Receipt  Receipt  Receipt  Receipt  Receipt  Receipt  Receipt	
City  State Zip Code  Mundelein  IL 60060-9538  Amount of Each Rec  FEC ID number of contributing federal political committee.  Name of Employer Northern IL Mack Inc.  Receipt For:  Primary General  Other (specify) ▼  City  DeKalb  FEC ID number of contributing  George Suter  Mailing Address 2580 Greenwood  City  DeKalb  FEC ID number of contributing federal political committee.  City  DeKalb  FEC ID number of contributing federal political committee.  Name of Employer  The Sutor Co. Inc  Receipt For:  Aggregate Year-to-Date ▼  Receipt  Receipt  Receipt  Transaction ID: 01  Amount of Each Receipt  Receipt  Receipt  Receipt  Receipt  Receipt  Receipt  Receipt  Receipt	
Mundelein IL 60060-9538  Amount of Each Rec FEC ID number of contributing federal political committee.  Name of Employer Northern IL Mack Inc.  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) George Suter  Mailing Address 2580 Greenwood  City State Zip Code IL 60115  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Primary General Occupation Retired  Aggregate Year-to-Date ▼  Amount of Each Receipt  Amount of Each Receipt  Receipt  Amount of Each Receipt	
FEC ID number of contributing federal political committee.  Name of Employer Northern IL Mack Inc.  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) George Suter  Mailing Address 2580 Greenwood  City State Zip Code IL 60115  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Primary General Occupation Retired  Aggregate Year-to-Date ▼  Receipt For:  Aggregate Year-to-Date ▼  Receipt For:  Aggregate Year-to-Date ▼  Receipt For:  Aggregate Year-to-Date ▼	C322704
Name of Employer Northern IL Mack Inc.  Receipt For:  Primary General Other (specify) ▼  City State Zip Code IL 60115  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Aggregate Year-to-Date ▼  Date of Receipt  Date of Receipt  Transaction ID: 01:  Amount of Each Receipt  C  Receipt For:  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Transaction ID: 01:  Amount of Each Receipt  Receipt  Receipt  Receipt  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	Receipt this Period
Northern IL Mack Inc.  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) George Suter  Mailing Address 2580 Greenwood  City State Zip Code DeKalb IL 60115  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Receipt For:  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 01  Amount of Each Receipt  Receipt  Receipt  Receipt  Aggregate Year-to-Date ▼	100.00
Primary General Other (specify) ▼  State Zip Code DeKalb  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For: Primary General  300.00  Date of Receipt  M M M D D D D 1 D D D D D D D D D D D D	
George Suter  Mailing Address 2580 Greenwood  City State Zip Code  DeKalb IL 60115  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Primary General  Date of Receipt  M M M / D D D D 2 9  Transaction ID: 01  Amount of Each Receipt  Receipt  Receipt  Aggregate Year-to-Date ▼	
City State Zip Code Transaction ID: 01:  DeKalb IL 60115  FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Primary General  State Zip Code Transaction ID: 01:  Amount of Each Receipt Amount of Each Receipt Transaction ID: 01:  Amount of Each Receipt Transaction ID: 01	
DeKalb IL 60115     FEC ID number of contributing federal political committee.     Name of Employer The Sutor Co. Inc Occupation Retired     Receipt For: Aggregate Year-to-Date     Aggregate Year-to-Date	
FEC ID number of contributing federal political committee.  Name of Employer The Sutor Co. Inc  Receipt For:  Primary General  C  Occupation Retired  Aggregate Year-to-Date ▼	
Name of Employer The Sutor Co. Inc  Receipt For:  Primary  General  Occupation Retired  Aggregate Year-to-Date  1100.00	Receipt this Period
Receipt For:  Primary  General  Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	3100.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 534 (check only one)    X
ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Robert Thrun			Date of Receipt
Mailing Address 246 Pheasant Lane	Ctata	7:p Code	11 09 2010
City Bloomingdale	State IL	Zip Code 60108	Transaction ID: 01130.C323020  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Anchor Products Company, Inc	Occupation Executive		Receipt
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 200.00	
Full Name (Last, First, Middle Initial) Robert Thrun			Date of Receipt
Mailing Address 246 Pheasant Lane			11 09 7 2010
City	State	Zip Code	Transaction ID: 01130.C323040
Bloomingdale  FEC ID number of contributing federal political committee.	C	60108	Amount of Each Receipt this Period  250.00
Name of Employer Anchor Products Company, Inc	Occupation Executive		Receipt
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 450.00	]
Full Name (Last, First, Middle Initial) Leonard Tobey			Date of Receipt
Mailing Address P.O. Box 588			10 25 YYYYY 25 2010
City <u>Herscher</u>	State IL	Zip Code 60941-0588	Transaction ID: C322542  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		120.00
Name of Employer Self-Employed	Occupation Contract		Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 440.00	
SUBTOTAL of Receipts This Page (optional)			570.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 534 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Illinois Republican Party	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Irene Tobin  Mailing Address 1410 Sheridian Road  City  Wilmette  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code IL 60091-1840  C	Date of Receipt    M M M
None  Receipt For:  Primary General  Other (specify) ▼	Retired  Aggregate Year-to-Date ▼  200.00	
Full Name (Last, First, Middle Initial) Irene Tobin  Mailing Address 1410 Sheridian Road		Date of Receipt  1 0 2 9 2 0 1 0
City	State Zip Code	Transaction ID: 01130.C321755
Wilmette FEC ID number of contributing federal political committee.	IL 60091-1840	Amount of Each Receipt this Period  100.00  Receipt
Name of Employer None	Occupation Retired	neceipi
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Paul Tucker		Date of Receipt
Mailing Address 49 Trout Dr.		10 27 2010
City	State Zip Code	Transaction ID: C322839
Highland  FEC ID number of contributing federal political committee.	IL 62249-1783	Amount of Each Receipt this Period 250.00
Name of Employer None	Occupation Retired	Receipt
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)	1	450.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 534 (check only one)    X   11a
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  Illinois Republican Party	and Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Oleg Vologin Mailing Address 10050 La Crosse A City Skokie FEC ID number of contributing federal political committee.  Name of Employer Rehabilitation Achievement	State Zip Code IL 60077-1008  C Occupation Massage Therapist	Date of Receipt    M M
Ctr Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  230.00	
Full Name (Last, First, Middle Initial) Oleg Vologin Mailing Address 10050 La Crosse	Ave State Zip Code	Date of Receipt  1 1 0 9 2 0 1 0
City Skokie  FEC ID number of contributing federal political committee.  Name of Employer Rehabilitation Achievement Ctr Receipt For:	IL 60077-1008  C  Occupation  Massage Therapist  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  50.00  Receipt
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	280.00	
Oleg Vologin  Mailing Address 10050 La Crosse		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Skokie  FEC ID number of contributing federal political committee.	State Zip Code  IL 60077-1008  C	Transaction ID: 01130.C322953  Amount of Each Receipt this Period  100.00
Name of Employer Rehabilitation Achievement Ctr Receipt For: Primary General	Occupation Massage Therapist  Aggregate Year-to-Date   380.00	Receipt
Other (specify) ▼  SUBTOTAL of Receipts This Page (option	nal)	200.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 534 (check only one)    X
ny information copied from such Reports and r for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Frank Voris			Date of Receipt
Mailing Address 103 Fairfax Cir			10 27 2710
City Sugar Grove	State IL	Zip Code 60554-8104	Transaction ID: C321904  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00004 0104	150.00
Name of Employer retired	Occupation Banker	on	Receipt
Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Wayne Waggoner			Date of Receipt
Mailing Address 1616 Cedar St # 19-D #19-D	)		10 26 2010
City Lawrenceville	State	Zip Code 62439-2154	Transaction ID: 01130.C322647
FEC ID number of contributing federal political committee.	C	02439-2134	Amount of Each Receipt this Period  100.00
Name of Employer None	Occupation Retired	on	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 575.00	]
Full Name (Last, First, Middle Initial) Robert Wakefield			Date of Receipt
Mailing Address 2804 24th St Unit 8			10 25 2010
City Rock Island	State IL	Zip Code 61201-5360	Transaction ID: C322573  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer None	Occupation Retired E	on Bank President	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional) .			350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 534   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	not be sold or used by any persol	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  Illinois Republican Party	The hame and add	iress or any political committee to	y solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Eileen Weicher			Date of Receipt
Mailing Address 537 N Euclid Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Oak Park	State IL	Zip Code 60302-1617	Transaction ID: 01130.C322949  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00002-1017	300.00
Name of Employer None	Occupation Homema		Receipt
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Henry Wheeler			Date of Receipt
Mailing Address 10 N Mayflower Rd			10 26 2010
City Lake Forest	State IL	Zip Code 60045-2421	Transaction ID: 01130.C322634
FEC ID number of contributing federal political committee.	C	00040-2421	Amount of Each Receipt this Period  150.00
Name of Employer None	Occupation Retired	1	Receipt
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Lorraine Wink			Date of Receipt
Mailing Address 611 S. Oakland Ave	е.		10 25 2010
City Villa Park	State IL	Zip Code 60181-3077	Transaction ID: C322707  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	301010011	60.00
Name of Employer None	Occupation Retired	١	Receipt
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		Year-to-Date ▼ 335.00	
SUBTOTAL of Receipts This Page (optional	.0		510.00

В.

### SCHEDULE A (FEC Form 3X)

PAGE 55 / 534 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Illinois Republican Party Full Name (Last, First, Middle Initial) Date of Receipt Barbara Winterland Mailing Address 35317 E. 2550 N. Road 29 2010 10 Zip Code City State Transaction ID: C322258 Colfax IL 61728-7511 Amount of Each Receipt this Period FEC ID number of contributing 100.00 C federal political committee. Receipt Name of Employer None Occupation Retired Receipt For: Aggregate Year-to-Date General Primary 600.00 Other (specify) Full Name (Last, First, Middle Initial) Samuel Zell Date of Receipt Mailing Address 2 N Riverside Plaza 29 2010 City State Zip Code Transaction ID: C322304 Chicago IL 60606-2600 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Receipt Name of Employer Equity Group Investments, Occupation Chairman of the Board Receipt For: Aggregate Year-to-Date

1000.00

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1100.00
TOTAL This Period (last page this line number only)	<b>•</b>	82052.00

Primary

Other (specify)

General

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
∠ 4.	Full Name (Last, First, Middle Initial) Republican National Committee			Date of Receipt
	Mailing Address 310 First St., S.E.			10 20 2010
	City Washington	State DC	Zip Code	Transaction ID: C322857
	Washington FEC ID number of contributing		20003-1801	Amount of Each Receipt this Period  181200.00
	federal political committee.  Name of Employer	Occupatio		
	Name of Employer	Occupation	!!	h.
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475527.43	
- 3.	Full Name (Last, First, Middle Initial) Target State Victory Fund			Date of Receipt
	Mailing Address 228 S Washington St Ste 115			10 26 2010
	City	State	Zip Code	Transaction ID: C321793
	Alexandria	VA	22314-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C coo	0487512	42885.98
	Name of Employer	Occupation	n	Transfers From Affil./Aut- h.
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		58907.66	
- ).	Full Name (Last, First, Middle Initial) David Franasiak	<u> </u>		Date of Receipt
-	Mailing Address 873 Coach Way			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 01202.C323071
	Annapolis	MD	21401-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		333.33
	Name of Employer Williams & Jensen, PLLC	Occupation Attorney	n	Transfer Memo
	Receipt For:    Primary   General	,	e Year-to-Date ▼	[MEMO ITEM]
	Other (specify)		333.33	MEMO: Targt.State Victory Fund
ſ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		224085.98
-				
	TOTAL This Period (last page this line number	only)		

CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate s for each categ Detailed Sumr	ory of the
ny information copied from such Reports and street for commercial purposes, other than using the	Statements may not be sold or us an and address of any politic	eed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	71	
Illinois Republican Party		
Full Name (Last, First, Middle Initial) George Vradenburg		Date of Receipt
Mailing Address 2901 Woodland Drive	NW	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 01202.C323087
Washington	DC 20008-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Vradenburg Foundation	Occupation President	Transfer Memo
Receipt For:	Aggregate Year-to-Date ▼	[MEMO ITEM]
Primary General	riggregate real to bate	MEMO: Tarat State Victory
Other (specify) ▼		1000.00 Fund
Full Name (Last, First, Middle Initial) KOCHPAC		Date of Receipt
Mailing Address 600 14th Street NW Suite 800		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 01202.C323077
Washington	DC 20005-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00236489	5000.00
Name of Employer	Occupation	Transfer Memo
Receipt For:	Aggregate Year-to-Date ▼	IMENO ITEM
Primary General	Aggregate rear-to-bate v	[MEMO ITEM] MEMO: Targt.State Victory
Other (specify) ▼		5000.00 Fund
Full Name (Last, First, Middle Initial) PriceWaterhouseCoopers PAC	I	Date of Receipt
Mailing Address 1301 K Street NW Suite 800 West		10 26 YYYYY
City	State Zip Code	Transaction ID: 01202.C323093
Washington	DC 20005-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00107235	1071.43
Name of Employer	Occupation	Transfer Memo
Receipt For:	Aggregate Year-to-Date ▼	[MEMO ITEM]
Primary General Other (specify) ▼		1071.43 MEMO: Targt.State Victory Fund
UBTOTAL of Receipts This Page (optional) .	<u>I</u>	0.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16
ny information copied from such Reports and r for commercial purposes, other than using the	Statements may be name and add	not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
Illinois Republican Party			
Full Name (Last, First, Middle Initial) American Assoc. Of Orthopedic Surgeons			Date of Receipt
Mailing Address 317 Massachusetts A	ve. NE		10 26 2010
City Washington	State DC	Zip Code 20002-	Transaction ID: 01202.C323072  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		343137	357.14
Name of Employer	Occupation	า	Transfer Memo
Receipt For: Primary General	Aggregate	Year-to-Date ▼	[MEMO ITEM] MEMO: Targt.State Victory
Other (specify) ▼	0 0	357.14	Fund
Full Name (Last, First, Middle Initial) Psychiatric Solutions Inc, PAC	•		Date of Receipt
Mailing Address 6640 Caruthers Parky Suite 500	way		10 26 2010
City Franklin	State TN	Zip Code 37067-	Transaction ID: 01202.C323075  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		407684	1100.00
Name of Employer	Occupation	1	Transfer Memo
Receipt For:	Aggregate	Year-to-Date ▼	[MEMO ITEM]
Primary General Other (specify) ▼	0 0	1100.00	MEMO: Targt.State Victory Fund
Full Name (Last, First, Middle Initial) American Health Care Association Pac	<b>I</b>		Date of Receipt
Mailing Address 1201 L Street NW			10 26 2010
City Washington	State DC	Zip Code 20005-	Transaction ID: 01202.C323073  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		006080	357.14
Name of Employer	Occupation	1	Transfer Memo
Receipt For:  Primary General	Aggregate	Year-to-Date ▼	[MEMO ITEM]
Other (specify) ▼		357.14	MEMO: Targt.State Victory Fund
SUBTOTAL of Receipts This Page (optional)	1		0.00

SCHEDULE A	EIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	13 14 15 1	12 16
or for commercial purpo	ses, other than using the na	tements may ame and addr	not be sold or used by any pers less of any political committee to	on for the purpose of soliciting contribution solicit contributions from such committed	ons ee.
NAME OF COMMIT Illinois Republica	, ,				
Full Name (Last, Fire	,			Date of Receipt	
S	01 8th Street NW uite 500			10 26 20	1.0
City Washington		State DC	Zip Code 20001-	Transaction ID: 01202.C3230  Amount of Each Receipt this Peri	
FEC ID number of c		<b>C</b> C003	90674	3571	1 1
Name of Employer		Occupation		Transfer Memo	
Receipt For: Primary Other (specify	General   ▼	Aggregate \	Year-to-Date ▼ 3571.43	[MEMO ITEM] MEMO: Targt.State Victory Fund	
Full Name (Last, Fire International Franchis	e Association			Date of Receipt	
Mailing Address 1	501 K Street NW uite 350				1.0
City Washington		State DC	Zip Code 20005-	Transaction ID: 01202.C3230	
FEC ID number of c			84491	Amount of Each Receipt this Peri	1 1
Name of Employer		Occupation		Transfer Memo	
Receipt For: Primary Other (specify	General   ▼	Aggregate `	Year-to-Date ▼ 1071.43	[MEMO ITEM] MEMO: Targt.State Victory Fund	
Full Name (Last, First	st, Middle Initial)			Date of Receipt	
Mailing Address 2	03 W. 10th Street				1.0
City		State	Zip Code	Transaction ID: 01202.C3230	
Austin FEC ID number of c federal political com		TX C C001	78701- 96444	Amount of Each Receipt this Peri	1 1
Name of Employer		Occupation		Transfer Memo	
Receipt For: Primary Other (specify	General ) ▼	Aggregate `	Year-to-Date ▼ 5000.00	[MEMO ITEM] MEMO: Targt.State Victory Fund	
SUBTOTAL of Recein	ts This Page (optional)				.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16 11
, A	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
. ∠ 4.	Full Name (Last, First, Middle Initial) Alamo Pac			Date of Receipt
	Mailing Address 919 Congress Avenue Suite 1400			10 26 7 9 9 9
	City Austin	State TX	Zip Code 78701-	Transaction ID: 01202.C323079  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		0387464	3846.15
	Name of Employer	Occupatio	n	Transfer Memo
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3846.15	[MEMO ITEM] MEMO: Targt.State Victory Fund
 3.	Full Name (Last, First, Middle Initial) Altria Group, Inc.  Mailing Address 101 Constitution Avenue	ue NW		Date of Receipt
	Cit.	10 26 2010		
	City Washington	State DC	Zip Code 20001-	Transaction ID: 01202.C323090  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		0089136	285.72
	Name of Employer	Occupatio	n	Transfer Memo
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 285.72	[MEMO ITEM] MEMO: Targt.State Victory Fund
 :	Full Name (Last, First, Middle Initial) Heartland Values PAC	l		Date of Receipt
•	Mailing Address P.O. Box 505			10 26 2010
	City	State	Zip Code	Transaction ID: 01202.C323083
	Sioux Falls FEC ID number of contributing federal political committee.	C coo	57101- 0409003	Amount of Each Receipt this Period 2083.33
	Name of Employer	Occupatio	n	Transfer Memo
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 2083.33	[MEMO ITEM] MEMO: Targt.State Victory Fund
	SUBTOTAL of Receipts This Page (optional)	1		0.00

SCHEDULE A (FE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16
or for commercial purposes,	other than using the name and a	nay not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE  Illinois Republican Pa	, ,		
Full Name (Last, First, Mi	nts&Brokers		Date of Receipt
Mailing Address 412 F Suite	300		10 26 2010
City Washington	State DC	Zip Code 20003-	Transaction ID: 01202.C323084  Amount of Each Receipt this Period
FEC ID number of contribution federal political committee		:00022343	5000.00
Name of Employer	Occupa	tion	Transfer Memo
Receipt For:  Primary  Other (specify) ▼	eneral Aggrega	ate Year-to-Date ▼ 5000.00	[MEMO ITEM] MEMO: Targt.State Victory Fund
Full Name (Last, First, Mi Investment Company Institu	ite PAC		Date of Receipt
Mailing Address 1401 Suite			10 26 2010
City Washington	State DC	Zip Code 20005-	Transaction ID: 01202.C323085  Amount of Each Receipt this Period
FEC ID number of contrik federal political committee	outing	00105981	357.14
Name of Employer	Occupa	tion	Transfer Memo
Receipt For:  Primary  Other (specify) ▼	eneral Aggrega	ate Year-to-Date ▼ 357.14	[MEMO ITEM] MEMO: Targt.State Victory Fund
Full Name (Last, First, Mi	ddle Initial)		Date of Receipt
	on Centre Drive 400		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 01202.C323082
Santa Ana FEC ID number of contrib federal political committee		92707-	Amount of Each Receipt this Period 357.14
Name of Employer	Occupa	tion	Transfer Memo
Receipt For:  Primary  Other (specify) ▼	eneral Aggrega	ate Year-to-Date ▼ 357.14	[MEMO ITEM] MEMO: Targt.State Victory Fund
SUBTOTAL of Receipts Th	is Page (optional)		0.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16 1
Any or fo	information copied from such Reports and Sor commercial purposes, other than using the	Statements may e name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) Ilinois Republican Party			
	Full Name (Last, First, Middle Initial) McGuireWoods Federal PAC Fund			Date of Receipt
N	Mailing Address One James Cener 901 East Cary Street			10 26 7 9 9 9
	City Richmond	State VA	Zip Code 23219-	Transaction ID: 01202.C323086
F	FEC ID number of contributing ederal political committee.		225342	Amount of Each Receipt this Period  357.14
_	Name of Employer	Occupation		Transfer Memo
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 357.14	[MEMO ITEM] MEMO: Targt.State Victory Fund
	Full Name (Last, First, Middle Initial) Making Business Excel PAC	1		Date of Receipt
N	Mailing Address P.O. Box 3241			10 26 2010
	City	State	Zip Code	Transaction ID: 01202.C323088
F	Cheyenne -EC ID number of contributing ederal political committee.	C Coox	82003- 392134	Amount of Each Receipt this Period  1428.57
<u> </u>	Name of Employer	Occupation		Transfer Memo
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1428.57	[MEMO ITEM] MEMO: Targt.State Victory Fund
	Full Name (Last, First, Middle Initial) Glaxosmithkline PAC			Date of Receipt
N	Mailing Address 5 Moore Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 01202.C323091
F	Durham	<b>C</b> C00	27709- 199703	Amount of Each Receipt this Period 357.14
1	Name of Employer	Occupation		Transfer Memo
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 357.14	[MEMO ITEM] MEMO: Targt.State Victory Fund
SII	BTOTAL of Receipts This Page (optional)			0.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Rep or for commercial purposes, other than	orts and Statements may not be sold or used by any person In using the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Illinois Republican Party		
Full Name (Last, First, Middle Initia National Association of Home Builders		Date of Receipt
Mailing Address 1201 15th Str		10 26 7 2010
City Washington	State Zip Code DC 20005-	Transaction ID: 01202.C323089  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C30001366	5000.00
Name of Employer	Occupation	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  5000.00	[MEMO ITEM]  MEMO: Targt.State Victory Fund
Full Name (Last, First, Middle Initia KPMG PAC Mailing Address P.O. Box 182	,	Date of Receipt
City	State Zip Code	1 0 2 6 2 0 1 0 Transaction ID: 01202.C323092
<u>Washington</u>	DC 20036-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00280222	1071.43
Name of Employer	Occupation	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1071.43	[MEMO ITEM] MEMO: Targt.State Victory Fund
Full Name (Last, First, Middle Initia  Medco Health Pac	l)	Date of Receipt
Mailing Address 2350 Kerner E Suite 250	Blvd	10 26 2010
City	State Zip Code	Transaction ID: 01202.C323074
San Rafael  FEC ID number of contributing federal political committee.	CA 94901- C C00384362	Amount of Each Receipt this Period  5000.00
Name of Employer	Occupation	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  5000.00	[MEMO ITEM] MEMO: Targt.State Victory Fund
SUBTOTAL of Receipts This Page (	optional)	0.00
	ne number only)	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and Si or for commercial purposes, other than using the	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Illinois Republican Party		
Full Name (Last, First, Middle Initial) Assoc.Of Private Section Colleges & Univ		Date of Receipt
Mailing Address 1101 Connecticut Ave. Suite 900		10 26 7 9 9 10
City Washington	State Zip Code DC 20036-	Transaction ID: 01202.C323081  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00213066	357.14
Name of Employer	Occupation	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 357.14	[MEMO ITEM] MEMO: Targt.State Victory Fund
Full Name (Last, First, Middle Initial)  Target State Victory Fund  Mailing Address 228 S Washington St		Date of Receipt
Ste 115	State Zip Code	1 0 2 8 2 0 1 0 Transaction ID: C322305
Alexandria	VA 22314-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00487512	14032.62
Name of Employer	Occupation	Transfers From Affil./Aut- h.
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 72940.28	
Full Name (Last, First, Middle Initial) Nancy Hiles		Date of Receipt
Mailing Address 2505 N. State Highway Suite 800	360	10 28 2010
City Grand Prairie	State Zip Code TX 75050-	Transaction ID: C323062  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer None	Occupation Homemaker	Transfer Memo
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼	[MEMO ITEM] MEMO: Targt.State Victory Fund
SUBTOTAL of Receipts This Page (optional)		14032.62

	HEDULE A (FEC Form 3X)  MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16 1
or fo	or commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full) Ilinois Republican Party		
. <u>N</u>	Full Name (Last, First, Middle Initial) Marcus Hiles		Date of Receipt
_	Mailing Address 2505 N. State Highway Suite 800		10 28 2010
	Dity Grand Prairie	State Zip Code TX 75050-	Transaction ID: C323061
F	FEC ID number of contributing ederal political committee.	C 75050-	Amount of Each Receipt this Period  325.00
	Name of Employer Western Rim Property Serv- ces	Occupation Chairman & CEO	Transfer Memo
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 325.00	[MEMO ITEM] MEMO: Targt.State Victory Fund
. <u>E</u>	Full Name (Last, First, Middle Initial) Bluegrass Committee Mailing Address 228 S. Washington Str		Date of Receipt
_	Mailing Address 228 S. Washington Str Suite 115	<u>eet                                   </u>	10 28 2010
	Dity Alexandria	State Zip Code VA 22314-	Transaction ID: C323058
F	FEC ID number of contributing ederal political committee.	C C00235655	Amount of Each Receipt this Period 5000.00
<u> </u>	Name of Employer	Occupation	Transfer Memo
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM] MEMO: Targt.State Victory Fund
	Full Name (Last, First, Middle Initial) Republican Majority Fund		Date of Receipt
_	Mailing Address P.O. Box 144 Suite 300		10 28 2010
	City Alexandria	State Zip Code VA 22313-	Transaction ID: C323063  Amount of Each Receipt this Period
F	FEC ID number of contributing ederal political committee.	<b>C</b> C00296640	5000.00
Ī	Name of Employer	Occupation	Transfer Memo
F	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	[MEMO ITEM] MEMO: Targt.State Victory Fund
SU	BTOTAL of Receipts This Page (optional)		0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Illinois Republican Party		
Full Name (Last, First, Middle Initial) 21st Century Majority Fund		Date of Receipt
Mailing Address 6065 Roswell Road P.O. Box 2274		10 28 7 2010
City Atlanta	State Zip Code GA 30328-	Transaction ID: C323060  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00361956	3571.43
Name of Employer	Occupation	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	[MEMO ITEM] MEMO: Targt.State Victory Fund
Full Name (Last, First, Middle Initial) Schock Victory Committee  Mailing Address 264 N Lumpkin St		Date of Receipt
City	State Zip Code	1 0 1 8 2 0 1 0 Transaction ID: 01130.C321766
Athens	GA 30601-2832	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00469395	15549.23
Name of Employer	Occupation	Transfers From Affil./Aut- h.
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 15549.23	
Full Name (Last, First, Middle Initial) Michael Stone		Date of Receipt
Mailing Address 142 W Detweiller Dr		10 18 2010
City	State Zip Code	Transaction ID: 01202.C323067
Peoria FEC ID number of contributing federal political committee.	IL 61615-	Amount of Each Receipt this Period  2400.00
Name of Employer RU	Occupation Insurance	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2400.00	[MEMO ITEM] MEMO: Schock Victory Committee
SUBTOTAL of Receipts This Page (optional)		15549.23

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16 17
7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	> Illinois Republican Party		
۸.	Full Name (Last, First, Middle Initial) Rebecca Frye		Date of Receipt
	Mailing Address 112 Fawn Ct.		10 18 2010
	City	State Zip Code IL 61571-	Transaction ID: 01202.C323065
	Washington  FEC ID number of contributing federal political committee.	IL 61571-	Amount of Each Receipt this Period 2400.00
	Name of Employer Agri-Business Solutions	Occupation	Transfer Memo
	Receipt For: Primary General Other (specify)	President  Aggregate Year-to-Date ▼  2400.00	[MEMO ITEM] MEMO: Schock Victory Committee
_ 3.	Full Name (Last, First, Middle Initial) Douglas Oberhelman		Date of Receipt
	Mailing Address 6000 N. Kickapoo Ed	wards Rd	10 18 2010
	City	State Zip Code	Transaction ID: 01202.C323066
	Edwards	IL 61528-	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	2400.00  Transfer Memo
	Name of Employer Caterpillar, Inc.	Occupation Group President	Transfer Weillo
	Receipt For:	Aggregate Year-to-Date ▼	[MEMO ITEM]
	Primary General Other (specify) ▼	2400.00	MEMO: Schock Victory Committee
_	Full Name (Last, First, Middle Initial) Schock Victory Committee		Date of Receipt
	Mailing Address 264 N Lumpkin St		10 29 2010
	City	State Zip Code	Transaction ID: 01130.C321765
	Athens FEC ID number of contributing	GA 30601-2832 C C00469395	Amount of Each Receipt this Period 3014.49
	federal political committee.		Transfers From Affil./Aut-
	Name of Employer	Occupation	h.
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 18563.72	
			3014.49

SCHEDULE A (FEC FO	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 534 (check only one)  11a 11b 11c X 12 13 14 15 16 1
Any information copied from such F or for commercial purposes, other t	Reports and Statements may not be sold or used by any penan using the name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full Illinois Republican Party	I)	
Full Name (Last, First, Middle In Delores Blaudow	itial)	Date of Receipt
Mailing Address P.O. Box 5	10965	10 29 7 2010
City Key Colony Beach	State Zip Code FL 33051-	Transaction ID: 01202.C323070
FEC ID number of contributing federal political committee.	FL 33051-	Amount of Each Receipt this Period 2400.00
Name of Employer	Occupation	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Homemaker  Aggregate Year-to-Date ▼  2400.00	[MEMO ITEM] MEMO: Schock Victory Committee
Full Name (Last, First, Middle In Rita Kress	itial)	Date of Receipt
	Brimfield Jubilee Rd.	10 29 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 01202.C323069
Brimfield	IL 61517-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2400.00  Transfer Memo
Name of Employer Kress Corp	Occupation President	Transfer Weillo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	[MEMO ITEM] MEMO: Schock Victory Committee
Full Name (Last, First, Middle In Mark Petersen	itial)	Date of Receipt
Mailing Address 830 W. Tra	ilcreek Dr.	10 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 01202.C323068
Peoria  FEC ID number of contributing	IL 61614-	Amount of Each Receipt this Period
federal political committee.	C	2400.00
Name of Employer Petersen Healthcare	Occupation President	Transfer Memo
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2400.00	[MEMO ITEM] MEMO: Schock Victory Committee
SUBTOTAL of Receipts This Pag	e (optional)	0.00
		256682.32

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 69 / 534									
,	Use separate schedule(s) for each category of the	(check only one)									
ITEMIZED RECEIPTS	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X17									
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)											
Illinois Republican Party											
Full Name (Last, First, Middle Initial) Illinois Republican Party		Date of Receipt									
Mailing Address LEVIN ACCOUNT 205 W. Randolph Street	t, #1245	10 15 2010									
City	State Zip Code	Transaction ID: C322933									
Chicago	IL 60606-	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	<b>C</b> C00005926	5000.00									
Name of Employer	Occupation	Other Receipt									
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00										

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	5000.00
TOTAL This Period (last page this line number only)	<b>•</b>	5000.00

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SCHEDULE B (FEC Form 3X)	Harasanan I. I. I. (	FOR LINF	INE NUMBER: PAGE 70 / 534								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only									
	Detailed Summary Page	X 21b 27	22 23 28a 28b	24 25 26 30b							
Any Information copied from such Reports and Statem	 nents may not be sold or used by										
or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)											
Illinois Republican Party											
Full Name (Last, First, Middle Initial) American Express Establishment Services			Transaction ID Date of Disburs	: 01130.E24371 ement							
Mailing Address P.O. Box 53852			10 / 2	29 7 2010							
City Phoenix	State Zip Code AZ 85072-		Amount of Each	Disbursement this Period							
Purpose of Disbursement Credit Card Processing		v v		4.95							
Candidate Name		Category/ Type									
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		CREDIT CARD PROCESSING								
Full Name (Last, First, Middle Initial)			Transaction ID	: 01130.E24520							
Angelos Pizza			Date of Disburs								
Mailing Address 1003 Curtiss Street			<b>11</b> 1 1	0 7 2010							
City Downers Grove	State Zip Code IL 60515-		Amount of Each	Disbursement this Period							
Purpose of Disbursement Food & Beverages for Volunteers				567.68							
Candidate Name	C	Category/									
Office Sought:    House   Disburse     Senate     President     State: District:	ement For: Primary General Other (specify)		FOOD & BEVI	ERAGES FOR VOLU-							
Full Name (Last, First, Middle Initial)			Transaction ID	: 01130.E24426							
Jonathan Blessing			Date of Disburs								
Mailing Address 1518 N Sedgwick St Unit Unit B	В		10 1	2 0 1 0 Y							
	State Zip Code		Amount of Each	Disbursement this Period							
Chicago	IL 60610-1223			33.50							
Purpose of Disbursement Mileage Reimbursement				00.00							
Candidate Name		Category/ Type									
Senate President	ement For: Primary General Other (specify)		MILEAGE REI	MBURSEMENT							
State: District:											
SUBTOTAL of Disbursements This Page (optional)		<u></u>		606.13							

TOTAL This Period (last page this line number only) .....

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)					R LINE NUMBER: PAGE 71 / 534 ck only one)												
ITEMIZED DISBURSEMENTS		tegory of the ummary Page		X	_	F	22 28a	П	23 28b	$oldsymbol{\sqcup}$	4 8c		25 29	Н	26 30b			
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name														S				
NAME OF COMMITTEE (In Full)																		
Illinois Republican Party																		
Full Name (Last, First, Middle Initial) Jonathan Blessing									on ID:	_	130	.E2	4427					
Mailing Address 1518 N Sedgwick St Uni	r B							M	/ D	D /	Y	ž	010	o <sup>Y</sup>				
Unit B																		
City Chicago		Zip Code 60610-1223					Amou	int o	f Each	Disbu	irse				d			
Purpose of Disbursement Travel Reimbursement				Ü									12.00	)				
Candidate Name				ate Ty	gory/ pe													
Office Sought: House Disburse Senate President State: District:	Senate Primary General Other (specify) ▼					TRAVEL REIMBURSEMENT												
Full Name (Last, First, Middle Initial)																		
Jonathan Blessing							Date	of D	on ID:	ement	130							
Mailing Address 1518 N Sedgwick St Uni Unit B	t B					10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y												
City Chicago		Zip Code 60610-1223					Amou	int o	f Each	Disbu	ırse				d			
Purpose of Disbursement REIMBURSEMENT: SEE BELOW						519.08						3						
Candidate Name				ate Ty	gory/ pe													
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specif	General <b>▼</b>					REIM	BU	RSEM	IENT	: S	EE I	BELC	W				
Full Name (Last, First, Middle Initial)							T		on ID:	10	004	Ε0	4044					
Costco							Date	of D	isburse	ement	304			V				
Mailing Address 2746 N. Clyborn Avenue							1 0	М	´	<b>4</b>	L	2	0 1 (	כ '				
City Chicago		Zip Code 60614-					Amou	int o	f Each	Disbu	irse	men	t this	Perio	d			
Purpose of Disbursement				U	-			0				3	80.38	3				
MEMO: Food & Beverage Reimb.  Candidate Name					gory/													
Office Sought: House Disbursi Senate President	ement For: Primary Other (specif	General <b>▼</b>		Ту	<del>ν</del> σ		MEM MEM GE R	O: 1	ИЕМĊ		OE	) & I	BEVE	ERA-	-			
State: District:																		
SUBTOTAL of Disbursements This Page (optional)					<u> </u>							5	31.08	3				

TOTAL This Period (last page this line number only) .....

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the Detailed Summary Page			OR LIN		-	P	PAGE 72 / 534					
ITEMIZED DISBURSEMENTS			X	-		22 28a	$\square$	23 28b	24 28c		25 29	26 30b	
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name				persor		the pu	ırpose	of so	oliciting c		outions		
NAME OF COMMITTEE (In Full)													
Illinois Republican Party													
Full Name (Last, First, Middle Initial)						Trans	sactio	n ID:	10315	5.E2	4842		
Ginos East						Date of Disbursement							
Mailing Address 2801 N. Lincoln Ave.					$\begin{bmatrix} 1 & 0 & M \\ 1 & 0 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 1 & 4 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$								
City	State Zip Code					Amou	ınt of l	Each	Disburse	emen	t this I	Period	
Chicago	IL 60657-	1			-						45.44	L	
Purpose of Disbursement FOOD & BEVG. REIMBURSEMENT						-	-	-		-			
Candidate Name			ateg	gory/ oe									
Senate President	ement For:  Primary General  Other (specify) ▼					[MEMO ITEM]  MEMO: FOOD & BEVG. REIMBU- RSEMENT						BU-	
State: District:													
Full Name (Last, First, Middle Initial) Grand River						Transaction ID: 10315.E24843 Date of Disbursement							
Mailing Address 3032 N. Lincoln Ave.													
City Chicago	State Zip Code IL 60657-					Amou	ınt of l	Each	Disburse	-			
Purpose of Disbursement FOOD & BEVERAGE REIMB.									_	93.26	5		
Candidate Name			ateç Typ	gory/ oe		MEM	IO IT	EN#1					
Senate President	ement For: Primary General Other (specify)	•							& BEV	ERA	GE F	REI-	
State: District:													
Full Name (Last, First, Middle Initial) Jonathan Blessing						Date	of Dis	burse					
Mailing Address 1518 N Sedgwick St Unit B Unit B						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
City Chicago	State Zip Code IL 60610-1223	<b>.</b>				Amou	ınt of l	Each	Disburse	emer	t this I	Period	
Purpose of Disbursement					-	49.00							
37 Signals Database Mgmt													
Candidate Name			ateç Typ	gory/ oe									
Senate President	ement For: Primary General Other (specify)				;	37 SI	GNA	LS C	)ATABA	SE	MGM	Т	
State: District:													
SUBTOTAL of Disbursements This Page (optional)								_			49.00		

TOTAL This Period (last page this line number only) .....

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SCHEDULE B (FEC Form 3X)	Use separate schedule	e(s)		-	INE NUMBER:			PAGE 73 / 534						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag		1 –	21b 27		22 28a	Н	23 28b	24		П	25 29		26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													S	
NAME OF COMMITTEE (In Full)														
Illinois Republican Party														
Full Name (Last, First, Middle Initial) Jonathan Blessing						Date	of D	isburs	: 011 ement	30.	E24	4478		
Mailing Address 1518 N Sedgwick St Unit Unit B	В				10 M / 28 / Y 2010							) <sup>Y</sup>		
,	State Zip Code IL 60610-12	23			Amount of Each Disbursement this Pe								d	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW					958.26						3			
Candidate Name		С		egory/ ype										
Senate President	ment For: Primary Gener Other (specify) ▼	al			REIMBURSEMENT: SEE BEI						BELC	W		
State: District: Full Name (Last, First, Middle Initial)						Tuana		ion ID	. 100			404E		
Taco Fresco						Date		isburs	: 103 ement	15.I				
Mailing Address 218 South Clark						1 0		2	23	L	2	0 1 (	<u>ט</u>	
•	State Zip Code IL 60604-					Amou	int o	f Each	Disbur	sen	nent	t this	Perio	d
Purpose of Disbursement FOOD & BEVERAGE REIMB.						L.		-			19	97.46	3	
Candidate Name				egory/ ype	١,	NA E NA		TE 1.4.						
Office Sought: House Disburse Senate President State: District:	ment For: Primary Gener Other (specify)	al			Ī	MEMO MEMO MB.			I ) & BE	VE	RA	GE F	REI-	
Full Name (Last, First, Middle Initial)						Trans	acti	on ID	: 103	15	F2/	18/16		
La Scarola						Date		isburs	ement	· ·				
Mailing Address 721 W. Grand Avenue						1 0			15	L	2	0 1 (	)	
•	State Zip Code IL 60654-					Amou	int o	f Each	Disbur	sen		-		d
Purpose of Disbursement FOOD & BEVERAGE REIMB.						L.				-	1	13.50	)	
Candidate Name		C		egory/ ype		MEM	ı	TEM.	1					
Office Sought: House Disburse Senate President State: District:	ment For: Primary Gener Other (specify)	al			Ī				) & BE	VE	RA	GE F	REI-	
orare. District.							•			_				$\overline{}$
SUBTOTAL of Disbursements This Page (optional) .				. •		<u></u>		-		<u></u>	95	58.26	5	$\exists$
TOTAL This Period (last page this line number only)				. •										

	B (FEC Form 3X)	Use separate schedule(s)				IE NUMBE	R:		PAGE 74 / 534				
FEMIZED DI	SBURSEMENTS	Detailed Summary Page		_	22 28a	$\vdash$	3 8b		24 28c	25 29			
	ied from such Reports and irposes, other than using th												
NAME OF COM Illinois Republ	MITTEE (In Full) lican Party												
Bricks Pizza	First, Middle Initial)					Date	saction of Disk	ours	_		24847 2 0 1		
Mailing Address	1909 N. Lincoln Av	e. #1				1 0			9		201	0	
City Chicago		State IL	Zip Code 60614-			Amou	int of E	Each	Disb	urseme	-		
Purpose of Disbu FOOD & BEVER	RAGE REIMB.				·		-				43.2	5	
Candidate Name	1				egory/ ype								
Office Sought:	Senate President	isbursement For: Primary Other (sp	General ecify) ▼		, r -	MEM MEM MB.		-		EVER	AGE I	REI-	
State: Full Name (Last.	District: First, Middle Initial)					Trons	action	- ID	10	315.E2	04040	•	
Sarpinos Pizza	•					Date	of Disk	ours	ement				
Mailing Address	627 W. Lake St.					10		C	5		ž 0 1	0	
City Chicago		State IL	Zip Code 60661-			Amou	ınt of E	Each	Disb	urseme	nt this	Perio	
Purpose of Disbu					·	T L.					33.9	0	
Candidate Name	1				egory/ ype	- FRA ERA	IO ITI	<b>- N</b> 4 1					
Office Sought:	Senate President	sbursement For: Primary Other (sp	General ecify) ▼			MEM MEM MB.				EVER	AGE I	REI-	
State:	District: First, Middle Initial)												
Sarpinos Pizza	•					Date	of Disk	ours	ement				
Mailing Address	627 W. Lake St.					1 <sup>M</sup> 0	M /	DC	9 9	¥ . 2	ž 0 1	0 1	
City Chicago		State IL	Zip Code 60661-			Amou	ınt of E	Each	Disb	ırseme			
Purpose of Disbu				•	•	<u> </u>					60.7	6	
Candidate Name					egory/ ype								
Office Sought:	Senate	isbursement For:	General	.,	• •	MEM MEM MB.				EVER	AGE I	REI-	
	President	Other (sp	ecify) 🔻										

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 75 / 534
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24850
Dominicks			Date of Disbursement
Mailing Address 255 East Grand Ave.			09 18 7 2010
City	State Zip Code		Amount of Each Disbursement this Period
Chicago	IL 60611-		69.55
Purpose of Disbursement BEVERAGE REIMB.			69.55
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	,	[MEMO ITEM] MEMO: BEVERAGE REIMB.
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24851
Costco			Date of Disbursement
Mailing Address 2746 N. Clyborn Avenue			$\begin{bmatrix}\begin{smallmatrix}M\\O\end{smallmatrix}B^M\end{smallmatrix} \ / \ \begin{bmatrix}D\\2\end{smallmatrix}A \ / \ \begin{bmatrix}Y\\20\end{smallmatrix}10^Y \\ \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Chicago	IL 60614-		050.07
Purpose of Disbursement FOOD & BEVERAGE REIMB.			252.67
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	,	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
Full Name (Last, First, Middle Initial)			Transaction ID: 10015 F04050
Tesa			Transaction ID: 10315.E24852 Date of Disbursement
Mailing Address 464 N. Halsted St.			10 M / D B / Y Y Y O Y O
City Chicago	State Zip Code IL 60622-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			77.29
Candidate Name		Category/	
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)	Туре	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
SUBTOTAL of Disbursements This Page (optional)			0.00

	CHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LINE NUMBER: PAGE 7 (check only one)				76 / 5	534		
	EMIZED DISBURSEMENTS	Detailed S	category of the Summary Page	×	21b 27	22 28a	23 28b	24 280		25 29	
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Illinois Republican Party	e and addres	ss of any political	COMMI	illee to so	iicit conti	ibutions n	om such	COIIII		
	Full Name (Last, First, Middle Initial) Mazas					Date o	action ID	ement	5.E2	4853	
	Mailing Address 2748 N. Lincoln Ave.					1 <sup>M</sup> 0	M / D	06	<sup>Y</sup> 2	0 1 0	Y
	City Chicago	State IL	Zip Code 60614-			Amou	nt of Eacl	n Disburs	-		
	Purpose of Disbursement FOOD REIMB.									50.60	
	Candidate Name				egory/ /pe	[MEM	O ITEM	]			
	Senate President	ement For: Primary Other (spe	General cify) ▼			MEMO	D: F00[	REIMI	3.		
	State: District:										
	Full Name (Last, First, Middle Initial) La Scarola					Date o	action ID of Disburs	ement			
	Mailing Address 721 W. Grand Avenue					1 <sup>M</sup> 0	M / D	08 /	ž	0 1 0	Y
	City Chicago	State IL	Zip Code 60654-			Amount of Each Disbursement th			t this P	Perio	
	Purpose of Disbursement FOOD & BEVERAGE REIMB.				·					59.28	
	Candidate Name				egory/ /pe	ra e ra	O ITEM	1			
	Office Sought:  Senate  President  State:  Disburse	ement For: Primary Other (spe	General cify) ▼			-	D: FOOI	•	/ERA	GE R	REI-
	Full Name (Last, First, Middle Initial) Jonathan Blessing						action ID		0.E2	4477	
	Mailing Address 1518 N Sedgwick St Unit Unit B	В				1 <sup>M</sup> 0	M / D	28 /	ž	0 1 0	Y
		State IL	Zip Code 60610-1223			Amou	nt of Eacl	Disburs			-
	Purpose of Disbursement 37 Signals Database Mgmt									49.00	
	Candidate Name				egory/ /pe						
	Senate President	ement For: Primary Other (spe	General cify) ▼			37 SI	GNALS	DATAB	ASE I	MGM <sup>-</sup>	Т
_	State: District:							•		• •	
0	UBTOTAL of Disbursements This Page (optional)				. •				4	19.00	

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SCHEDULE B (FEC Form 3X)		arate schedule(s)			IE NUMBER: PAGE 77 / 534 nly one)												
ITEMIZED DISBURSEMENTS		category of the Summary Page	Ò	21b 27	F	22 28a		23 28b		24 28c		25 29	$\square$	26 30b			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													5				
NAME OF COMMITTEE (In Full) Illinois Republican Party																	
Full Name (Last, First, Middle Initial) Blue Sky Aero Inc.						Date o	of D	sburse					Y				
Mailing Address 9980 N. Rt. 47					Amount of Each Disbursement this Period												
,	State IL	Zip Code 60450-				Amou	nt o	f Each	Di	sburse	-			7			
Purpose of Disbursement Transportation							-				_ 7	57.60					
Candidate Name				egory/ /pe													
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ocify) ▼			TRANSPORTATION												
Full Name (Last, First, Middle Initial) Certegy Merchant Relations						Trans Date of				01130 ent	.E2	4372					
Mailing Address P.O. Box 30070 TA-02						1 <sup>M</sup> 0	М	<sup>D</sup> 2	9	/ Y	ž	0 i 0	) <sup>Y</sup>				
,	State FL	Zip Code 33630-				Amou	nt o	f Each	Di	sburse	men	t this f	Period	_			
Purpose of Disbursement Credit Card Processing							-	_			_1	14.37					
Candidate Name				egory/ /pe													
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ccify) ▼				CRED	ΙT	CARI	) F	PROC	ESS	SING					
Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	: (	01130	.E2	4393		—			
Certegy Merchant Relations						Date o	of Di				Y	Y	Y				
Mailing Address P.O. Box 30070 TA-02						1 1		1	2		2	0 i 0	)				
Tampa	State FL	Zip Code 33630-				Amou	nt o	f Each	Di	sburse	-			_			
Purpose of Disbursement Credit Card Processing			0	·			-	-	_		0	70.97		_			
Candidate Name				egory/ /pe													
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General cify) ▼				CRED	ΙT	CARI	) F	PROC	ESS	SING					
State: District:	(-150	<del></del>												_			
SUBTOTAL of Disbursements This Page (optional) .			 	. •							94	<b>42.9</b> 4					

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LINI	E NUMBEF	R:	PAGE 78/5			534
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	-	22 28a	23 28b		24 28c	25 29	2 3
any Information copied from such Reports and State									3
r for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	le and address of any political	COMMI	ilee io s	Olicit Coritrit	DULIONS IT	om su	ich co	mmuee	
Illinois Republican Party									
Full Name (Last, First, Middle Initial) Citizens for Bill Brady					ction ID			E24468	
Mailing Address PO Box 5314				10	/ D2	26	Y	ž 0 1 (	) Y
City Bloomington	State Zip Code IL 61702-5314			Amoun	t of Each	n Disbu	ursem	ent this	Period
Purpose of Disbursement	IL 61702-3314			+ Г				1200.00	)
Rent					-		-		
Candidate Name		Cate							
Office Sought: House Senate President State: District:	ement For:  Primary General  Other (specify)			RENT					
Full Name (Last, First, Middle Initial)				Tropos	ation ID	. 01:	1001	704004	
Comcast Cable					Ction ID:	ement			Y
Mailing Address P.O. Box 3001				1 0	2	26	L	ž 0 i (	)
City Southeastern	State Zip Code PA 19398-			Amoun	t of Each	n Disbu	ursem	ent this I	Period
Purpose of Disbursement Cable Television								1175.72	2
Candidate Name		Cate							
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)			CABLE	TELE\	VISIO	N		
Full Name (Last, First, Middle Initial) Comcast Cable					ction ID			E24574	
Mailing Address P.O. Box 3001				1 1	/ D	15	Y	ž 0 1 (	Y
City	State Zip Code			Amoun	t of Each	n Disbu	ursem	ent this	Period
Southeastern Purpose of Disbursement	PA 19398-							588.15	5
Cable Television					-	-		-	
Candidate Name		Cate							
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)			CABLE	TELE	VISIO	N		
SUBTOTAL of Disbursements This Page (optional)			<b>•</b>				2	2963.87	7
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TOTAL This Period (last page this line number only 6AN026	)		•		Schedu	l. E.		030 :=	

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SCHEDULE B (FEC Form 3X)		arate schedule(s)			FOR LIN		E NUMBER: PAGE 79 / 534									
ITEMIZED DISBURSEMENTS		category of the Summary Page		_	21b 27	П	22 28a		23 28b	F	24 28c		25 29		26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														5		
NAME OF COMMITTEE (In Full)		7.														
Illinois Republican Party																
Full Name (Last, First, Middle Initial)							Trans	acti	ion ID:	:	01130	.E2	4573			
Comcast Cable							Date of	of D	isburs							
Mailing Address P.O. Box 3001						111 D 15 / Y 2010 Y										
City Southeastern	State PA	Zip Code 19398-				Amount of Each Disbursement this								Perio	d	
Purpose of Disbursement					•							2	11.07	7		
Cable Television			Ļ	_												
Candidate Name					egory/ ype											
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼			760	CABLE TELEVISION										
Full Name (Last, First, Middle Initial)							Trans	anti	ion ID:	_	01130	<b>⊏</b> 2	1575			
Comcast Cable									isburs				4373			
Mailing Address P.O. Box 3001						111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						) <sup>Y</sup>				
	State PA	Zip Code 19398-					Amou	nt o	f Each	ı C	Disburse	nen	t this	Perio	d	
Purpose of Disbursement Comcast Cable			Г	_				_				5	79.57	7		
Candidate Name					egory/ ype											
Senate President	ment For: Primary Other (spe	General <b>▼</b>					COM	CAS	ST CA	AΕ	BLE					
State: District:																
Full Name (Last, First, Middle Initial) Commonwealth Edison							Date of	of D	isburs	en						
Mailing Address P.O. Box 6111							1 1	М	/ D 1	1 5	5 / L	ž	0 1 (	)		
	State IL	Zip Code 60197-					Amou	nt o	f Each	ı C	Disburse	-			od	
Purpose of Disbursement Utilities								_				4	30.72	2		
Candidate Name					egory/ ype											
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General <b>▼</b>					UTILI	TIE	S							
State: District:																
SUBTOTAL of Disbursements This Page (optional)					▶							12	21.36	5		

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age# 11990320773		
SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)    X   21b
		y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee
NAME OF COMMITTEE (In Full) Illinois Republican Party		
Full Name (Last, First, Middle Initial) Curt Conrad		Transaction ID: 01130.E24213 Date of Disbursement
Mailing Address 2704 Cronin Dr		10 M / D 1 D / Y 2 0 1 0 Y
City Springfield	State Zip Code IL 62711-7083	Amount of Each Disbursement this Period
Purpose of Disbursement Mileage Reimbursement Candidate Name		Category/ Type
Office Sought:  House Senate President State:  Disburs	sement For: Primary General Other (specify) ▼	MILEAGE REIMBURSEMENT
Full Name (Last, First, Middle Initial) Curt Conrad  Mailing Address 2704 Cronin Dr		Transaction ID: 01130.E24214 Date of Disbursement  M O M / D D D / Y Y Y O Y O Y
City Springfield	State Zip Code IL 62711-7083	Amount of Each Disbursement this Period
Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name		Category/ Type
Office Sought:    House   Disburs     Senate   President     State: District:	sement For: Primary General Other (specify) ▼	REIMBURSEMENT: SEE BELOW
Full Name (Last, First, Middle Initial) Double Tree Hotel		Transaction ID: 10315.E24855 Date of Disbursement
Mailing Address 1909 Spring Rd		0 9 M / D 1 8 / Y 2 0 1 0 Y
City Oak Brook	State         Zip Code           IL         60523-3906	Amount of Each Disbursement this Period
Purpose of Disbursement HOTEL REIMB.		500.00
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼	Category/ Type  [MEMO ITEM] MEMO: HOTEL REIMB.
l		2145 21
SUBTOTAL of Disbursements This Page (optional	)	<u></u> 2145.21

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	_		NE NUMBER: PAGE 81 / 534 only one)											
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21	ıb [	22 28a	23 28b	24 28c	$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$								
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		y any per	son f	or the pu	irpose of s	oliciting co	ontribut	ions							
NAME OF COMMITTEE (In Full)															
Illinois Republican Party															
Full Name (Last, First, Middle Initial)				Trans	saction ID:	: 10315	.E248	 56							
Holiday Inn				Date	of Disburs										
Mailing Address 350 W. Mart Center Drive	)		0 9 M / D 2 D / Y 2 0 1 0 Y												
•	State Zip Code IL 60654-			Amou	int of Each	Disburse	ment th	nis Period							
Purpose of Disbursement HOTEL REIMB.	Г	* *	7				305	.82							
Candidate Name	C	Category Type	/		IO ITEM										
Office Sought:  Senate President  State:  Disburse	ment For: Primary General Other (specify)			-	I <b>O ITEM]</b> O: HOTE		3.								
Full Name (Last, First, Middle Initial)															
Holiday Inn Express				Date	saction ID: of Disburs	ement									
Mailing Address 640 N. Wabash Avenue				0 9	M / D 2	29 /	ž o	10							
,	State Zip Code IL 60611-			Amou	ınt of Each	Disburse									
Purpose of Disbursement HOTEL REIMB.	Г			L.			394	.67							
Candidate Name	C	Category Type		rm en	IO ITEM]										
Senate President	ment For: Primary General Other (specify)			-	O: HOTE		3.								
State: District:															
Full Name (Last, First, Middle Initial) Randolph Wells Self Parking					saction ID: of Disburs		5.E248	58							
Mailing Address 200 W. Randolph St.				0 9	M / D	9 /	Ž0	1 0 Y							
	State Zip Code IL 60606-			Amou	ınt of Each	Disburse	ement th	nis Period							
Purpose of Disbursement PARKING GARAGE REIMB.	Г			L.			20	.00							
Candidate Name		Category Type	/	rm en	IO ITEM]										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		MEMO: PARKING GARAGE REIM B.												
State: District:															
SUBTOTAL of Disbursements This Page (optional) .			<u> </u>				0	.00							

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# SCHEDULE B (FEC Form 3X)

FOR LINE NUMBER: PAGE 82 / 534 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 24 25 26 Detailed Summary Page 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Illinois Republican Party Full Name (Last, First, Middle Initial) Transaction ID: 10315.E24859 Randolph Wells Self Parking Date of Disbursement 0 1 1 0 2010 Mailing Address 200 W. Randolph St. City State Zip Code Amount of Each Disbursement this Period 60606-Chicago IL 20.00 Purpose of Disbursement PARKING GARAGE REIMB. Candidate Name Category/ Type [MEMO ITEM] MEMO: PARKING GARAGE REIM-B. Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 10315.E24860 Randolph Wells Self Parking Date of Disbursement 07 1 0 2010 Mailing Address 200 W. Randolph St. City State Zip Code Amount of Each Disbursement this Period 60606-Chicago IL 20.00 Purpose of Disbursement PARKING GARAGE REIMB. Candidate Name Category/ Туре [MEMO ITEM] Office Sought: House Disbursement For: MEMO: PARKING GARAGE REIM-Senate Primary General President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 10315.E24861 Holiday Inn Date of Disbursement 06 2010 Mailing Address 350 W. Mart Center Drive City State Zip Code Amount of Each Disbursement this Period Chicago IL 60654-192.72 Purpose of Disbursement HOTEL REIMB. Candidate Name Category/ Type [MEMO ITEM] Office Sought: House Disbursement For: MEMO: HOTEL REIMB. Senate Primary General President Other (specify) State: District: 0.00

SUBTOTAL of Disbursements This Page (optional) ...

TOTAL This Period (last page this line number only) .....

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SCHEDULE B (FEC Form 3X)	Use separate s			FOR LIN			R:		PAGE 83 / 534					
ITEMIZED DISBURSEMENTS	for each catego Detailed Summ		1-	21b 27		22 28a		23 28b	$\begin{bmatrix} 2 \\ 2 \end{bmatrix}$	4 8c	П	25 29	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													5	
NAME OF COMMITTEE (In Full) Illinois Republican Party														
Full Name (Last, First, Middle Initial) Curt Conrad  Mailing Address 2704 Cronin Dr						Trans Date o		burse	ement	30.		4293 0 1 (	) <sup>Y</sup>	
,		Code 711-7083				Amou	nt of	Each	Disbu	rser	nent	t this F	Period	
Purpose of Disbursement Mileage Reimbursement											60	07.00		
Candidate Name				egory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify)	General ▼			ı	MILE	AGE	REI	MBUI	RSE	EME	ENT		
Full Name (Last, First, Middle Initial) Curt Conrad						Trans Date o	of Dis	burse	ement	30.			V	
Mailing Address 2704 Cronin Dr						1 <sup>M</sup> 0	M /	<sup>D</sup> 2	8 /	Ľ	Ž	0 1 0	)	
,		Code 711-7083				Amou	nt of	Each	Disbu	rser	nent	t this F	Period	
Purpose of Disbursement Telephone Expense			_			L.	_				.10	00.00		
Candidate Name		C		egory/ ype										
Senate President	ment For: Primary Other (specify)	General ▼			-	TELE	PHC	NE I	EXPE	:NS	Е			
State: District: Full Name (Last, First, Middle Initial)						<b>T</b>		ID.	011	20	<b>-</b>	4004		
Curt Conrad						Trans Date o		burse	ement	3U.			V	
Mailing Address 2704 Cronin Dr						1 0		<sup>D</sup> 2	8	Ľ	2	οťα	)	
•		Code 711-7083				Amou	nt of	Each	Disbu	rser	-		-	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Г		-			-	_			9	15.49		
Candidate Name				egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General ▼			REIMBURSEMENT: SEE BELOW					W				
State: District:	· · · · · · · · · · · · · · · · · · ·													
SUBTOTAL of Disbursements This Page (optional) .				<b>•</b>							162	22.49		

	B (FEC Form 3X)		rate schedule(s)	FOR LINE	E NUMBER: PAGE 84 / 534 (v one)
I EMIZED D	ISBURSEMENTS		category of the Summary Page	X 21b 27	22 23 24 25
				by any person	28a 28b 28c 29 for the purpose of soliciting contributions plicit contributions from such committee
NAME OF CON Illinois Repub	MITTEE (In Full) Iican Party				
Full Name (Last Holiday Inn E	, First, Middle Initial) xpress				Transaction ID: 10315.E24862 Date of Disbursement
Mailing Address	640 N. Wabash Aver	nue			10 M / D D / Y 2010 Y
City Chicago		State IL	Zip Code 60611-		Amount of Each Disbursement this Period
Purpose of Disb HOTEL REIMB					197.34
Candidate Name	9			Category/ Type	
Office Sought:	House Disk Senate President District:	oursement For: Primary Other (spe	General cify) ▼		MEMO: HOTEL REIMB.
State: Full Name (Last	, First, Middle Initial)				Transaction ID: 10315.E24863
,	ells Self Parking				Date of Disbursement
Mailing Address	200 W. Randolph St.				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Chicago		State IL	Zip Code 60606-		Amount of Each Disbursement this Period
Purpose of Disb				· · ·	31.00
Candidate Name	<del></del>			Category/ Type	IMEMO ITEMI
Office Sought:	Senate President	oursement For: Primary Other (spe	General cify) ▼		[MEMO ITEM]   MEMO: PARKING GARAGE REIM   B.
State: Full Name (Last	District:				Transaction ID: 10315.E24864
Ontario Gara	ge				Date of Disbursement
Mailing Address	10 E. Ontario				10 11 7 2010
City Chicago		State IL	Zip Code 60611-		Amount of Each Disbursement this Perio
Purpose of Disb				•	34.00
PARKING GAR				Category/	
	9			Tvpe	
PARKING GAR		oursement For: Primary Other (spe	General	Туре	[MEMO ITEM] MEMO: PARKING GARAGE REIM B.

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) for each category of the	FOR LINE (check on	E NUMBER: PAGE 85 / 534
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23 24 25 26
	, ,	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
/ Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24865
Randolph Wells Self Parking			Date of Disbursement
Mailing Address 200 W. Randolph St.			
City	State Zip Code		Amount of Each Disbursement this Period
Chicago	IL 60606-		20.00
Purpose of Disbursement PARKING GARAGE REIMB.			20.00
Candidate Name		Category/	
		Туре	[MEMO ITEM]
Office Sought: House Disburse Senate	ement For:  Primary General		MEMO: PARKING GARAGE REIM-
President	Other (specify)		B.
State: District:	, ,		
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24866
Holiday Inn			Date of Disbursement
Mailing Address 205 Remington Bouleval	rd		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code		Amount of Each Disbursement this Period
Bolingbrook	IL 60440-		199.47
Purpose of Disbursement HOTEL REIMB.			100.47
Candidate Name		Category/ Type	IMENO ITEM
·	ement For:		→ [MEMO ITEM] MEMO: HOTEL REIMB.
Senate   President	Primary General Other (specify) ▼		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24867
Holiday Inn			Date of Disbursement
Mailing Address 350 W. Mart Center Driv	e		10 M / D D / Y Y Y O Y O Y
City	State Zip Code		Amount of Each Disbursement this Period
Chicago Purpose of Disbursement	IL 60654-		402.68
HOTEL REIMB.			
Candidate Name		Category/	
Office Cought.	nmont For	Туре	[MEMO ITEM]
Office Sought: House Disburse Senate	ement For:  Primary General		MEMO: HOTEL REIMB.
President	Other (specify)		
State: District:			
CURTOTAL of Disharasarasata Title Daniel ( 19 19			0.00
<b>SUBTOTAL</b> of Disbursements This Page (optional)		<b></b>	0.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINI (check on	E NUMBER:		PA	GE 86/	534		
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Any Information copied from such Reports and State										
r for commercial purposes, other than using the nam	ie and address of any politica	l comr	nittee to s	olicit contributio	ons from	such co	ommittee			
NAME OF COMMITTEE (In Full) Illinois Republican Party										
Full Name (Last, First, Middle Initial)				Transactio	n ID:	10315.	E24868	}		
Randolph Wells Self Parking				Date of Dis		ent / Y	YY	Υ		
Mailing Address 200 W. Randolph St.				1 0	2 1		201	0		
City Chicago	State Zip Code IL 60606-			Amount of	Each Di	sburser	ment this	Period		
Purpose of Disbursement	1L 00000			-			31.00	0		
PARKING GARAGE REIMB.										
Candidate Name			tegory/ ype							
Senate President	ement For: Primary General Other (specify)	•		MEMO: P B.	-	G GAF	RAGE R	EIM-		
State: District: Full Name (Last, First, Middle Initial)										
Curt Conrad					bursem	ent	E24382			
Mailing Address 2704 Cronin Dr				1 1 1 /	15	/ Y	ž 0 1	0 <sup>Y</sup>		
City Considered	State Zip Code			Amount of	Each Di	sburser	nent this	Period		
Springfield Purpose of Disbursement	IL 62711-7083	) 		-			2195.80	0		
REIMBURSEMENT: SEE BELOW					-					
Candidate Name			tegory/ ype							
Office Sought: House Senate President State: District:	ement For:  Primary General  Other (specify) ▼			REIMBUF	RSEME	NT: SE	EE BELO	OW		
Full Name (Last, First, Middle Initial) English Bar & Restaurant				Transaction Date of Dis			E24869	)		
Mailing Address 444 N. LaSalle Dr.				09 /	<sup>D</sup> 3 0	/ Y	ž 0 1	0 <sup>Y</sup>		
City	State Zip Code IL 60654-			Amount of	Each Di	sburser	ment this	Period		
Chicago Purpose of Disbursement	IL 00004-			-			1773.5	4		
FOOD & BEVERAGE REIMB.					-	-				
Candidate Name			tegory/ ype							
Office Sought: House Senate President State: District:	ement For:  Primary General  Other (specify) ▼	1		MEMO: F	-	BEVE	RAGE I	REI-		
SUBTOTAL of Disbursements This Page (optional)			•				2195.80	0		
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SCHEDULE B (FEC Form 3X)	arate schedule(s)		OR LIN		R:			PA	GE	87 /	534	$\Box$	
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name												5	
NAME OF COMMITTEE (In Full) Illinois Republican Party													
Full Name (Last, First, Middle Initial) Illinois Republican Party					Date		isburs				4870 0 1 (	Y	
Mailing Address Cole Taylor Federal Acco	ount				1 0			2 3			010	,	
	State IL	Zip Code 60606-			Amou	nt o	f Each	ı Di:	sburse	men	t this I	Period	1
Purpose of Disbursement MILEAGE REIMB.				·	<u></u>	_	•			2	01.00	)	
Candidate Name		egory/ /pe											
Office Sought: House Disburse Senate President State: District:			 MEM MEM		-	-	E REI	MB.					
Full Name (Last, First, Middle Initial)					Trans	act	ion ID	: '	10315	.E2	4871		_
Illinois Republican Party					M	of D	isburs		ent / Y	Y	Y	Υ	
Mailing Address Cole Taylor Federal Acco 205 W. Randolph	ount				1 0		2	2 7		2	010	)	
•	State IL	Zip Code 60606-			Amou	nt o	f Each	ı Di	sburse	men	t this I	Period	_
Purpose of Disbursement MILEAGE REIMB.					L.	_	-			2	01.00	)	
Candidate Name				egory/ /pe				_					
Senate President	ment For: Primary Other (spe	General ecify) ▼		·	 MEM MEM		_	-	E REI	MB.	•		
State: District: Full Name (Last, First, Middle Initial)					Trana	oot	ion ID		10315	Ea	1070		_
Ontario Garage					Date		isburs	eme	ent			V	
Mailing Address 10 E. Ontario					1 0	IVI	້	25	J ´L	2	0 1 (	)	
City Chicago	State IL	Zip Code 60611-			Amou	nt o	f Each	ı Di:	sburse	men	t this I	Period	_
Purpose of Disbursement PARKING GARAGE REIMB.					_				_	20.26	3		
Candidate Name				egory/ /pe									
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General	_		MEM MEM B.		-	-	G GAI	RAC	GE RI	ΞIM-	
State: District:	- (- 30	<i>→</i> / <b>▼</b>											_
SUBTOTAL of Disbursements This Page (optional) .			 	. •							0.00	)	

S	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		_	R LINE NUMBER: PAGE 88 / 5 eck only one)					534					
ľ	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X	21b 27		22 28a		23 28b		24 28c	Н	25 29		26 30b
	ny Information copied from such Reports and Staten r for commercial purposes, other than using the nam														
K	NAME OF COMMITTEE (In Full)	e and address of any political	COIII	111111	ee 10 St	OIIC	it Contin	Duti	10115 11	OIII	Sucii	COITII	iiillee		
	Illinois Republican Party														
A.	Full Name (Last, First, Middle Initial) Cook County Republican Party						Transa Date o					0.E2	4470		
	Mailing Address 10548 Roberts Road						10	M .	/ D	2 6	/	ž	0 1 C	Y	
	City Palos Hills	State Zip Code IL 60465-					Amou	nt o	f Each	n Di	sburse			-	d
	Purpose of Disbursement Rent							_				10	50.00		_
	Candidate Name			ateg Type											
	Senate President	ement For:  Primary General  Other (specify)					RENT								
_	State: District:														
В.	Full Name (Last, First, Middle Initial) Cook County Republican Party						Transa Date o	of Di	isburs	em	ent				
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K	NAME OF COMMITTEE (In Full)	The dist dual cool of disty points												
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	Purpose of Disbursement Food & Beverage Reimbursement						-			_	4	32.0	0	
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	Office Sought: House Disbur Senate President	Senate Primary General President Other (specify) ▼  State: District:												
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	City Naperville	State Zip Code IL 60563-				Amou	int of	Each	n Disbu	rse	men	t this	Perio	bd
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s			NUMBE	R:			Р	AGE	90 /	534	1
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			R LINE NUMBER: PAGE 91 / 534 eck only one)									
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Food & Beverage Reimbursement					,		-				_	1	_
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Senate	Primary General				NT	G DL	. v L	. 1 1/-	UL	1 (L	IIVIDO	,	
State: President State:	Other (specify)												
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Eric Di Silvestro					ate of	Disbu	ırse	me		,. <u>L</u>	070		
Mailing Address 1510 N Bosworth Ave A	ot 1				м м 1	/	<sup>D</sup> 1	5	/	Y	ž 0 Ť	0 <sup>Y</sup>	
City	State Zip Code			Ar	noun	t of Ea	ıch	Dis	burse	eme	nt this	Peri	od
Chicago	IL 60642-7612			-							261 A	A.	-
Purpose of Disbursement Food & Beverage Reimbursement	1	-			-		-				_U I .U	Ų	-
Candidate Name	-	Categ											
Office Sought: House Disburs Senate	ement For: Primary General			FC MF	OD NT	& BE	VE	RA	GE	RE	IMBU	JRSI	E-
President	Other (specify)			'*'									
State: District:													
Full Name (Last, First, Middle Initial)  Downers Grove Twp Rep. Organization						i <b>ction</b> Disbu	ırse	me		).E2	24467	7	
Mailing Address 137 Iris Rd					0	/	□2	6		Y	ž 0 Ť	0 <sup>Y</sup>	
City	State Zip Code			Ar	noun	t of Ea	ch	Dis	burse	eme	nt this	Peri	od
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Office Sought: House Disburs: Senate President	ement For: Primary General Other (specify)			RE	NT								
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Mailing Address 118 N. Saint Asaph St.			1 0		18		010	,
,	State Zip Code VA 22314-		Amou	nt of Eac	h Disburse	-		-
Purpose of Disbursement Party Fundraising Internet						- 2	98.54	
Candidate Name		egory/ ype						
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		PART	Y FUND	DRAISING	G IN	ITERI	NET
Full Name (Last, First, Middle Initial) EDonation 1 Account				action ID	01130 sement	).E2	4659	
Mailing Address 118 N. Saint Asaph St.			1 <sup>M</sup> 0	M / D	28	Ž	010	) <sup>Y</sup>
,	State Zip Code VA 22314-		Amou	nt of Eac	h Disburse	emen	t this I	Period
Purpose of Disbursement Party Fundraising Internet		•				17	51.80	
Candidate Name		egory/ ype						
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)		PART	Y FUNE	DRAISING	G IN	ITERI	NET
Full Name (Last, First, Middle Initial)			Trans	action ID	): 01201	.E2	4664	
EDonation 1 Account			M	of Disburs		/ <u>Y</u>	Y	Υ
Mailing Address 118 N. Saint Asaph St.			11		10 /	2	010	)
	State Zip Code VA 22314-		Amou	nt of Eac	h Disburse	emen	t this f	Period
Purpose of Disbursement Party Fundraising Internet		•	T L.			11	32.70	)
Candidate Name		egory/ ype						
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼		PART	Y FUND	DRAISING	G IN	ITERI	NET
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	one)	PAGE 93 / 534
		27		28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Illinois Republican Party				
Full Name (Last, First, Middle Initial) Anthony Esposito			Transaction ID: 01 Date of Disbursement	
Mailing Address 1620 Hintz Ln Apt 2B Apt 2B			10 28	2010°
•	State Zip Code IL 60090-5266		Amount of Each Disb	ursement this Period
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		•		1093.66
Candidate Name		Category/ Type		
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)		REIMBURSEMENT	: SEE BELOW
Full Name (Last, First, Middle Initial)			Transaction ID: 10	215 F2/873
Pizanos Pizza			Date of Disbursement	
Mailing Address 864 N. State Street			$\begin{bmatrix} 1 & 0 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 2 \end{bmatrix}$	2010
•	State Zip Code IL 60610-		Amount of Each Disb	ursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.	111			40.91
Candidate Name		Category/ Type	IMENO ITEM	
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & B MB.	EVERAGE REI-
State: District: Full Name (Last, First, Middle Initial)				
Dominicks			Transaction ID: 10 Date of Disbursement	t
Mailing Address 255 East Grand Ave.			10 0 4	2010
	State Zip Code IL 60611-		Amount of Each Disb	ursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.				43.66
Candidate Name		Category/ Type		
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify)	1 100	[MEMO ITEM] MEMO: FOOD & B MB.	EVERAGE REI-
State: District:	Carior (opcony)			
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SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 94 / 534
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	y one)
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	e and address of any political	Committee to so	incit contributions from such committee
Illinois Republican Party			
Full Name (Last, First, Middle Initial)			<b>Transaction ID:</b> 10315.E24875
Dominos			Date of Disbursement
Mailing Address 1022 Waukegan Rd.			
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.		· · ·	33.72
Candidate Name		Category/	
Office Sought: House Disburse	ement For:	Туре	[MEMO ITEM]
Office Sought: House Disburse Senate	Primary General		MEMO: FOOD & BEVERAGE REI- MB.
President State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24876
Dominos			Date of Disbursement
Mailing Address 1022 Waukegan Rd.			10
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement	1L 00002-		20.63
FOOD & BEVERAGE REIMB.  Candidate Name		Category/	
Cardidate Name		Type	[MEMO ITEM]
Office Sought: House Disburse	ment For:    Primary   General		MEMO: FOOD & BEVERAGE REI-
President	Other (specify)		MB.
State: District: Full Name (Last, First, Middle Initial)			
Northbrook Convn. Store			Transaction ID: 10315.E24877 Date of Disbursement
Mailing Address 2766 Dundee Road			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & 1 & 0 \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement	00002	· · ·	50.21
BEVERAGE REIMB. Candidate Name		Category/	
Office Country	mant Fau	Туре	[MEMO ITEM]
Office Sought: House Disburse Senate	ement For:  Primary General		MEMO: BEVERAGE REIMB.
President State: District:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)			0.00

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	Full Name (Last, Find Dominicks	· 							Date o		isburs			24878 2 0 1		1
	Mailing Address	4125 Dundee Rd.							1 0	_		9		201	U	
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	Mailing Address	300 E. Dundee Ro	ad.						1 <sup>M</sup> 0	М	/ D	<sup>D</sup> 4	/ Y	ž 0 ť	0	
	City Wheeling		State IL	Zip Code 60090-					Amou	nt o	f Each	Dist	ourseme	ent this	Peri	iod
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	Candidate Name	-				ateg Typ										
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,	State IL	Zip Code 60062-					Amou	nt o	f Each	ı Di	sburse	men	t this f	Period	d
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Office Sought: House Disburse Senate President State: District:	pgory/ /pe		[MEM MEMO MB.		-	•	BEVE	ĒR₽	GE F	REI-					
Full Name (Last, First, Middle Initial) Walgreens Mailing Address 1975 Cherry Lane							Date o		isburse		/ Y		4882 0 1 (	) <sup>Y</sup>	
,	State IL	Zip Code 60062-					Amou	nt o	f Each	Di	sburse	men			d
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Candidate Name  Office Sought: House Disburse	ment For:				egory/ /pe		MEM				REIMB.				
Senate President State: District:	Primary Other (spec	General cify) ▼					IVILIVIC	J. F	-001	ח ע	ICIIVID.	•			
Full Name (Last, First, Middle Initial) Dominicks							Date o	of D	isburse	em					
Mailing Address 4125 Dundee Rd.							1 <sup>M</sup> 0	М	<sup>/</sup> 1	6	] / [ *	ž	0 1 C	) <sup>Y</sup>	
Northbrook	State IL	Zip Code 60062-					Amou	nt o	f Each	Di	sburse	-			b
Purpose of Disbursement FOOD & BEVERAGE REIMB.				Ĭ								. 1	12.11		
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NAME OF COMMITTEE (In Full) Illinois Republican Party															
Full Name (Last, First, Middle Initial) Dominicks  Mailing Address 4125 Dundee Rd.							Date of		isburs	103 ement	15.I		1884 0 1 0	Y	
	State	Zip Code						nt o		Disbu	com				
Northbrook	IL	60062-					Amou	iii o	Lacii	DISDUI	Sen		•	-	J
Purpose of Disbursement FOOD & BEVERAGE REIMB. Candidate Name			Ca	atc	egory/						•		10.04		
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Full Name (Last, First, Middle Initial) Dominicks									on ID:	103 ement	15.1	E24	1885		
Mailing Address 4125 Dundee Rd.							1 <sup>M</sup> 0	М	<sup>/</sup> 2	0 /	Υ	ž	οťο	Y	
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Candidate Name					egory/		- N.A N.A	<b>~</b> '	T-141						
Senate President	ement For: Primary Other (spe	General cify) ▼					MEMO MEMO MB.				VE	RA	GE F	REI-	
State: District: Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	103	15 I	=24	1886		
Dominicks							Date of	of D	isburs	ement	. v			V	
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SCHEDULE B (FEC Form 3X)	Lian annovata aghadula(a)	FOR LINE	NUMBER: PAGE 98 / 534
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22   23   24   25   26 28a   28b   28c   29   30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	e and address of any political	Committee to so	ment contributions from such committee
Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24887
Dominicks			Date of Disbursement
Mailing Address 4125 Dundee Rd.			10 M / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			76.32
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	7,1	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24888
Dominos			Date of Disbursement
Mailing Address 1022 Waukegan Rd.			10 16 7 2010
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement			27.18
FOOD & BEVERAGE REIMB.  Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	7,7,2	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: 10315.E24889
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City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			23.63
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	туре	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	0.00

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	Purpose of Disbu	RAGE REIMB.									23.6	3
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Full Name (Last, First, Middle Initial) Buffalo Wild Wings  Mailing Address 1018 Willow Road							Date of		isburse				4893 0 1 0	) <sup>Y</sup>	
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Mailing Address 1018 Willow Road							1 <sup>M</sup> 0	М	<sup>/</sup> 2	2 4	/ Y	ž	0 i 0	) <sup>Y</sup>	
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Full Name (Last, First, Middle Initial)						+					10315	.E2	4895		
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Senate President State: District:	Primary Other (spec	General ify) ▼					MB.								
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SCHEDULE B (FEC Form 3X)		1	
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Anthony Esposito			Transaction ID: 01130.E24538 Date of Disbursement
Mailing Address 1620 Hintz Ln Apt 2B Apt 2B			111
•	State         Zip Code           IL         60090-5266		Amount of Each Disbursement this Period
Purpose of Disbursement ToiletreesCupsPlatesNapkins			171.30
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		TOILETREESCUPSPLATESNAPKI- NS
State: District:			
Full Name (Last, First, Middle Initial) Anthony Esposito			Transaction ID: 01130.E24537 Date of Disbursement
Mailing Address 1620 Hintz Ln Apt 2B Apt 2B			1 1 1 D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		REIMBURSEMENT: SEE BELOW
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Full Name (Last, First, Middle Initial) Dominos			Transaction ID: 10316.E24896 Date of Disbursement
Mailing Address 1022 Waukegan Rd.			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ O & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.		v v	17.09
Candidate Name		Category/ Type	IMEMO ITEMI
Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
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Full Name (Last, First, Middle Dominos	e Initial)					Date of [	tion ID: 1 Disburseme			
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Purpose of Disbursement FOOD & BEVERAGE REIM	В.			·		L			38.7	72
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NAME OF COMMITTEE (In Full) Illinois Republican Party  Full Name (Last, First, Middle Initial) Dominos  Mailing Address 1022 Waukegan Rd.  City State Northbrook IL  Purpose of Disbursement FOOD & BEVERAGE REIMB.  Candidate Name	Zip Code 60062-	Category/	Transaction Date of Disb	Dursement  Dursement
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FOOD & BEVERAGE REIMB.  Candidate Name	For:			
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Senate	ry General (specify) ▼		-	OD & BEVERAGE REI-
Full Name (Last, First, Middle Initial)  Dominos			Transaction Date of Disb	n ID: 10316.E24901
Mailing Address 1022 Waukegan Rd.			M M /	0 3 0 Y 2 0 1 0 Y
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Northbrook IL	60062-			
Purpose of Disbursement FOOD & BEVERAGE REIMB.			L	46.26
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Full Name (Last, First, Middle Initial) Dominos			Transaction Date of Disb	n ID: 10316.E24902 oursement
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City State Northbrook IL	Zip Code 60062-		Amount of E	ach Disbursement this Period
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Candidate Name		Category/ Type		
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NAME OF COMMITTEE (In Full)	Thaine and address of any politica	i committee to sc	Sicil Contributions from Such Committee
Illinois Republican Party			
Full Name (Last, First, Middle Initial) Greek Feast			Transaction ID: 10316.E24903 Date of Disbursement
Mailing Address 2784 Dundee Road			09 10 7 2010
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			21.26
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Dis Senate President	bursement For:  Primary General  Other (specify) ▼		MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
Full Name (Last, First, Middle Initial) Dominicks			Transaction ID: 10316.E24904 Date of Disbursement
Mailing Address 4125 Dundee Rd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			71.02
Candidate Name		Category/ Type	IMEMO ITEMI
Office Sought: House Dis Senate President	bursement For:  Primary General  Other (specify) ▼		[MEMO ITEM]  MEMO: FOOD & BEVERAGE REI-  MB.
State: District:			
Full Name (Last, First, Middle Initial) Dominicks			Transaction ID: 10316.E24905 Date of Disbursement
Mailing Address 4125 Dundee Rd.			10 25 7 2010
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			29.47
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Dis Senate President	bursement For:  Primary General  Other (specify) ▼		MEMO: FOOD & BEVERAGE REI- MB.
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r for commercial purposes, other than using the name	e and address of any political co	mmittee to so	licit contributions fro	om such committee				
NAME OF COMMITTEE (In Full) Illinois Republican Party								
Full Name (Last, First, Middle Initial) Dominicks			Date of Disburse					
Mailing Address 4125 Dundee Rd.			10 M / D2	28 7 2010				
City Northbrook	State Zip Code IL 60062-		Amount of Each	Disbursement this Period				
Purpose of Disbursement FOOD & BEVERAGE REIMB.				44.18				
Candidate Name		Category/ Type	[MEMO ITEM]					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)			& BEVERAGE REI-				
Full Name (Last, First, Middle Initial) Dominicks			Transaction ID: Date of Disburse	: 10316.E24908 ement				
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Candidate Name		Category/ Type	[MEMO ITEM]	ſ				
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Full Name (Last, First, Middle Initial) Dominicks			Transaction ID:	: 10316.E24909 ement				
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Candidate Name					egory/ ype				T-14						
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Full Name (Last, First, Middle Initial)							_								
Walgreens							Date of	of D	isburs	en			_		
Mailing Address 1975 Cherry Lane							1 <sup>M</sup> 0	М	/ D 2	2 7	7 ' [	Ž	0 1 (	) \	
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	Full Name (Last,	First, Middle Initial)								Trans	sact	ion ID	: 10	316	.E2	4913	
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	Mailing Address	2722 Dundee F	Road							11			) 1	L	2	0 1	0
	City Northbrook			State IL	Zip Code 60062-					Amou	ınt c	of Each	Disb	urse	-		Period
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	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General pecify) ▼					MEM MEM MB.				EV	ERÆ	AGE I	REI-
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	Full Name (Last, Dunkin Donut	First, Middle Initial)										ion ID	-		.E2	4914	
	Mailing Address	499 Lake Cook	Road								M		B 0	' [`	Ž	01	0 <sup>Y</sup>
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	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General pecify) ▼					MEM MB.				EV	ERA	AGE I	REI-
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	Full Name (Last, Sandwiches S	First, Middle Initial) Subway	•									ion ID	-		6.E2	4916	
	Mailing Address	300 Skokie Blv	d. #C							1 <sup>M</sup> 0	М	/ D3	3 O		Ź	01	0 Y
	City Northbrook			State IL	Zip Code 60062-					Amou	ınt c	of Each	Disb	urse	men	t this	Period
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	Office Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General		. 300			MEM MEM MB.				EV	ERA	AGE I	REI-
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TOTAL This Period (last page this line number only) .....

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID: 10316.E24917
Sandwiches Subway			Date of Disbursement
Mailing Address 300 Skokie Blvd. #C			$\begin{bmatrix} \begin{smallmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D & D \\ D & D \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \   \end{bmatrix}$
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			65.55
Candidate Name		Category/	
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
Full Name (Last, First, Middle Initial) Buffalo Wild Wings			Transaction ID: 10316.E24918 Date of Disbursement
Mailing Address 1018 Willow Road			$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 3 & 1 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.		• •	111.71
Candidate Name		Category/ Type	MENO ITEM
Senate President	sement For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District: Full Name (Last, First, Middle Initial)			
Dominicks			Transaction ID: 10316.E24962 Date of Disbursement
Mailing Address 4125 Dundee Rd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Northbrook	State Zip Code IL 60062-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.		•	119.68
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	sement For: Primary General Other (specify)	Туре	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
SUBTOTAL of Disbursements This Page (optional)	1		0.00

J,	CHEDULE B (FEC Form 3)	J Use sep	arate schedule(s)	-	NUMBER: PAGE 110 / 534
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	y Information copied from such Reports an				
$\frac{3}{2}$	NAME OF COMMITTEE (In Full) Illinois Republican Party	the name and addre	ss or any pontical	committee to so	icit contributions from Such confinitiee
·	Full Name (Last, First, Middle Initial) FLS Connect, LLC				Transaction ID: 01130.E24269 Date of Disbursement
	Mailing Address 7300 Hudson Blv	d N			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City Saint Paul	State MN	Zip Code 55128-7141		Amount of Each Disbursement this Period
	Purpose of Disbursement Party Fundraising Telemarketing Candidate Name			Category/	5000.00
	Office Sought:  Senate President  State:  District:	Disbursement For: Primary Other (spe	General ecify) ▼	Туре	PARTY FUNDRAISING TELEMAR- KETING
	Full Name (Last, First, Middle Initial) FLS Connect, LLC				Transaction ID: 01130.E24517 Date of Disbursement
	Mailing Address 7300 Hudson Blv	d N			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City Saint Paul	State MN	Zip Code 55128-7141		Amount of Each Disbursement this Perio
	Purpose of Disbursement Party Fundraising Telemarketing				4607.67
	Candidate Name			Category/ Type	
	Office Sought:  Senate  President  State:  District:	Disbursement For: Primary Other (spe	General ecify) ▼		PARTY FUNDRAISING TELEMAR- KETING
	Full Name (Last, First, Middle Initial) Andrew Griswold				Transaction ID: 01130.E24442 Date of Disbursement
	Mailing Address 536 W Fayette Av	/e			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
	City Springfield	State IL	Zip Code 62704-2735		Amount of Each Disbursement this Perio
	Purpose of Disbursement REIMBURSEMENT: SEE BELOW				961.29
	Candidate Name			Category/ Type	
	Office Sought: House Senate	Disbursement For:  Primary	General		REIMBURSEMENT: SEE BELOW
	President State: District:	Other (spe	ecify) 🔻		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NE NUMBER: PAGE 11 only one)			111 /	534	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b		22 28a	23 28b	24 28c	$\vdash$	25 29	26 30b
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NAME OF COMMITTEE (In Full)									
Illinois Republican Party									
Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta					saction ID of Disburs		5.E249	919	
Mailing Address 1168 E. Sangamon Aven	ue			8 <sup>M</sup> 0	M / D	26	ž	) 1 0	Y
•	State Zip Code			Amou	unt of Each	n Disburse	ement t	this F	Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.	32702	• •	1				4	0.49	
Candidate Name		Category/ Type	1			_			
Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify)			-	<b>10 ITEM</b> ] O: FOO[		ERAG	GE R	EI-
Full Name (Last, First, Middle Initial)									
Fulgenzis Pizza & Pasta				Date	of Disburs	ement			V
Mailing Address 1168 E. Sangamon Aven	ue			0 9	M / D	9 /	2 (	) i 0	
•	State Zip Code IL 62702-			Amou	unt of Each	Disburse			
Purpose of Disbursement FOOD & BEVERAGE REIMB.							2	3.88	
Candidate Name		Category/ Type		TN/EN/	O ITEM				
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)				O: FOOE		ERAG	BE R	EI-
State: District:									
Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta					saction ID of Disburs		5.E249	921	
Mailing Address 1168 E. Sangamon Aven	ue			1 <sup>M</sup> 0	M / D	04	ž	) 1 0	Y
	State Zip Code IL 62702-			Amou	unt of Each	Disburse	ement t	this F	Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.				L.			5	7.50	
Candidate Name		Category/ Type		IMEM	IO ITEM	ı			
Senate President	ment For: Primary General Other (specify) ▼				MEMO: FOOD & BEVERAGE REI- MB.				
State: District:									
SUBTOTAL of Disbursements This Page (optional) .		I	<u> </u>				. (	0.00	

CHEDULE B (FEC Form 3X)	Use sep	arate schedule(s)		OR LINE check on	IE NUMBER:						/ 534
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NAME OF COMMITTEE (In Full)	iamo ana adare	oo or any pomicar			011011 00111	- Iout	10110 11				
Illinois Republican Party											
Full Name (Last, First, Middle Initial) Mel-O-Cream								: 103 ement	16.E	24922	
Mailing Address 3010 South 6th St.					0 <sup>M</sup> 8	М	/ D	2 8 /	Υ	ž 0 1 c	) <sup>Y</sup>
City Springfield	State IL	Zip Code 62703-			Amou	unt o	f Each	n Disbur	seme	nt this F	Perio
Purpose of Disbursement		02700	-	-						17.49	)
FOOD & BEVERAGE REIMB.											
Candidate Name				egory/ vpe							
Senate President	ursement For: Primary Other (sp	General ecify) ▼		11.5	MEM MEM MB.			] D & BE	VER	AGE F	REI-
State: District:											
Full Name (Last, First, Middle Initial) Mel-O-Cream								: 103 ement	16.E	24923	
Mailing Address 3010 South 6th St.					1 <sup>M</sup> 0	М	/ D	D 2 /	Y	ž o i c	) <sup>Y</sup>
City	State	Zip Code			Amou	unt o	f Each	n Disbur	seme	nt this F	Perio
Springfield Purpose of Disbursement	IL	62703-								21.11	l
FOOD & BEVERAGE REIMB.								-		-	
Candidate Name			Cate	egory/							
Senate President	ursement For: Primary Other (sp	General ecify) ▼	, y	рс	[MEMO ITEM]  MEMO: FOOD & BEVERAGE REI  MB.					REI-	
State: District:  Full Name (Last, First, Middle Initial)					_			400	40.5		
Sams Club					Date	of D	isburs	: 103 ement			
Mailing Address 2300 White Oaks Dr.					8 <sup>M</sup> 0	М	/ D;	3 1	Υ	ž o ž c	) <sup>Y</sup>
City Springfield	State IL	Zip Code 62704-			Amou	unt o	f Each	n Disbur	seme	nt this F	Peric
Purpose of Disbursement	16	02,01		-						185.86	3
FOOD & BEVERAGE REIMB.  Candidate Name											
Office Sought: House Disbring Senate President	ursement For: Primary Other (sp	General ecify) ▼	.,	/pe	MEM MEM MB.			] D & BE	VER	AGE F	REI-
State: District:											

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 113 / 534
ITEMIZED DISBURSEMENTS	ose separate scriedule(s) for each category of the		y one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem		by any person f	for the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political of	committee to so	licit contributions from such committee
NAME OF COMMITTEE (In Full)  Illinois Republican Party			
/			
Full Name (Last, First, Middle Initial) Sams Club			Transaction ID: 10316.E24925
Sams Glub			Date of Disbursement
Mailing Address 2300 White Oaks Dr.			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 0 \\ 2 & 0 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 2 & 0 & 1 \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Springfield Purpose of Disbursement	1L 62704-		117.02
FOOD & BEVERAGE REIMB.			
Candidate Name		Category/	
Office Sought: House Disburse	ement For:	Туре	[MEMO ITEM]
Senate	Primary General		MEMO: FOOD & BEVERAGE REI- MB.
President	Other (specify)		
State: District:  Full Name (Last, First, Middle Initial)			
Sams Club			Transaction ID: 10316.E24927 Date of Disbursement
M. W. A.I.I.			09 28 7 2010
Mailing Address 2300 White Oaks Dr.			09 28 2010
City Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement	02704		77.48
FOOD & BEVEREAGE REIMB.			
Candidate Name		Category/ Type	
	ment For:		[MEMO ITEM] MEMO: FOOD & BEVEREAGE RE-
Senate   President	Primary General Other (specify) ▼		IMB.
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial)			Transaction ID: 10316.E24928
Turaskys Meats			Date of Disbursement
Mailing Address 1129 Taintor Road			09
	State Zip Code IL 62702-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			51.84
Candidate Name		Category/	
		Туре	[MEMO ITEM]
Office Sought: House Disburse Senate	ment For:    Primary   General		MEMO: FOOD & BEVERAGE REI- MB.
President	Other (specify)		IVID.
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			0.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS				Use separate schedule(s)				E NUMBER: PAGE 114 / 534 nly one)							
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	Full Name (Last, Walgreens	First, Middle Initial)									10310 ement	6.E2	4929	١	
	Mailing Address	1310 South 5th S	t.					0 <sup>M</sup> 9	M /	<sup>D</sup> 1	3 /	Y Ž	010	0 <sup>Y</sup>	
	City Springfield		State IL	Zip Code 62703-				Amou	int of	Each	Disburs	emen	t this	Perio	
	Purpose of Disbu				-	_	7		_				18.86	6	
	Candidate Name	,		'	Cate Ty	egory	/								
	Office Sought:	Senate President	Disbursement For: Primary Other (sp	General pecify) ▼				(MEM		_	RAGE F	REIN	ИB.		
_	State:	District: First, Middle Initial)									1001		1001		
	Saputos Italia							Date	of Dis	burs	10310 ement				
	Mailing Address	801 E Monroe St.						0 9	M /	□ 1	3 /	' 2	010	0 '	
	City Springfield		State IL	Zip Code 62701-1915				Amou	int of	Each	Disburs	emen	t this	Perio	
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	Candidate Name	,			Cate Ty		/								
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	State:	District: First, Middle Initial)									1001		4000		
	Saputos Italia							Date	of Dis	burs	10310 ement				
	Mailing Address	801 E Monroe St.						0 <sup>M</sup> 9	M /	1	<sup>D</sup> 4	ž	010	0 1	
	City Springfield		State IL	Zip Code 62701-1915				Amou	int of	Each	Disburs	emen	t this	Perio	
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	Candidate Name	,			Cate Ty	egory	/								
	Office Sought:	House Senate President	Disbursement For: Primary Other (s)	General pecify) ▼		-		MEM MEM MB.		-	& BEV	ERA	AGE F	REI-	
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SCHEDULE B (FEC Form 3X)	Llas apparets appadula(a)	FOR LINE	NUMBER:	PAGE 115 / 534
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)   22   23	24 25 26
	Detailed Summary Page	27	28a 28b	28c 29 30b
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NAME OF COMMITTEE (In Full) Illinois Republican Party				
Full Name (Last, First, Middle Initial)			Transaction ID: 10	 1316 F24933
Saputos Italian Foods Inc.			Date of Disbursemer	
Mailing Address 801 E Monroe St.			09 / 27	Ý 2010 Ý
City Springfield	State         Zip Code           IL         62701-1915		Amount of Each Disl	oursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.		, ,		42.10
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)	7,75	[MEMO ITEM] MEMO: FOOD & E MB.	BEVERAGE REI-
State: District:				
Full Name (Last, First, Middle Initial) Saputos Italian Foods Inc.			Transaction ID: 10 Date of Disbursemen	nt
Mailing Address 801 E Monroe St.			09 / 30	2010
City Springfield	State         Zip Code           IL         62701-1915		Amount of Each Disl	oursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.				42.10
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)	,,	[MEMO ITEM] MEMO: FOOD & E MB.	BEVERAGE REI-
State: District:				
Full Name (Last, First, Middle Initial) Taco Gingo			Transaction ID: 10 Date of Disbursemen	nt
Mailing Address 975 Clocktower Drive			09 / 22	<sup>Y</sup> 2010 <sup>Y</sup>
City Springfield	State Zip Code IL 62704-		Amount of Each Disl	oursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.				27.39
Candidate Name		Category/ Type	IMENO ITEM	
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & E MB.	BEVERAGE REI-
State: District:				
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	ny Information copied from such Reports and State for commercial purposes, other than using the nar												
	NAME OF COMMITTEE (In Full)	ne and address of any point	Jai COI	11111111	.66 10 30	JIIGIL GOITLI	ibutio	0113 111	oni such	COIII	milloc		
	Illinois Republican Party												
۷.	Full Name (Last, First, Middle Initial) Food Mart					Date	of Dis	sburs	: 1031 ement				
	Mailing Address 600 North 9th Street					0 9	M /	<sup>D</sup> 2	2 8 /	2	ž o ť	0	
	City Springfield	State Zip Code IL 62702-				Amou	ınt of	Each	Disburs				od
	Purpose of Disbursement FOOD & BEVERAGE REIMB.					L.					40.0	0	
	Candidate Name			ateg Typ		- FRANCIS	10 17	TE 8.41					
	Office Sought: House Disburs Senate President	sement For:  Primary Genera  Other (specify) ▼	ıl			MEM MEM MB.		_	) & BE\	'ER	AGE	REI-	
	State: District:												
3.	Full Name (Last, First, Middle Initial) Shop-N-Save								: 1031 ement	6.E2	24937	7	
	Mailing Address 1755 Wabash					1 0	M /	<sup>D</sup> C	2 /	Y	ž o ž	0 <sup>Y</sup>	
	City Springfield	State Zip Code IL 62704-				Amou	ınt of	Each	Disburs	emer	nt this	Perio	od
	Purpose of Disbursement BEVERAGE REIMB.		T			L.		•			14.6	9	
	Candidate Name			Categ Typ	-		10 17						
	Senate President	sement For: Primary Genera Other (specify) ▼	ıl			MEM		-	RAGE	REIN	ИВ.		
_	State: District: Full Name (Last, First, Middle Initial)					Trans	actio	on ID:	: 1031	 6.E2	24938	3	
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	Mailing Address 2801 Chatham Rd.					1 0			04	2	ž o ť	0	
	City Springfield	State Zip Code IL 62704-				Amou	ınt of	Each	Disburs	emer	nt this	Perio	od
	Purpose of Disbursement FOOD & BEVERAGE REIMB.					<u> </u>					89.5	3	
	Candidate Name			Categ Typ			10 17						
	Office Sought: House Disburs Senate President	sement For: Primary General Other (specify)	ıl			MEM MEM MB.		_	) & BE\	ÆR/	AGE	REI-	
_	State: District:												
,	SUBTOTAL of Disbursements This Page (optional	)			<b>•</b>						0.0	0	
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		LINE NU			PAGE	117 /	534
TEMIZED DISBURSEMENTS	for each category of the	1 <del>-</del>	ck only on 21b	1e) 22	23 🔲	24	25	□ 26
	Detailed Summary Page			28a		28c	29	30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								<b>'</b>
NAME OF COMMITTEE (In Full)								
/ Illinois Republican Party								
Full Name (Last, First, Middle Initial)				Transacti	on ID: 01	1130 F2	4493	
Andrew Griswold					isbursemer		-1-100	
Mailing Address 536 W Fayette Ave				10 M	28	/ Y 2	010	Y
City	State Zip Code			Amount of	f Each Disk	oursemer	nt this P	eriod
Springfield	IL 62704-2735				• • •		77.00	
Purpose of Disbursement Cable Cords and Postage							77.80	
Candidate Name		Category	v/					
		Type						
	ement For:			CABLE C	ORDS A	ND POS	STAGE	Ē
Senate President	Primary General Other (specify) ▼							
State: District:	] • (epos), •							
Full Name (Last, First, Middle Initial)			1	Transacti	on ID: 01	1130.E2	4494	
Andrew Griswold					isbursemer			_
Mailing Address 536 W Fayette Ave				10 M	28	/	010	Y
•	State Zip Code			Amount of	f Each Dist	oursemer	nt this P	eriod
Springfield	IL 62704-2735			· · ·	• • •	11	20.42	-
Purpose of Disbursement REIMBURSEMENT: SEE BELOW						, , , ,	29.43	
Candidate Name		Category	ry/					
Office Sought: House Disburse	ement For:	Турс	_					
Senate	Primary General			KEIMBU	RSEMEN'	I: SEE	BELO	W
President	Other (specify)							
State: District: Full Name (Last, First, Middle Initial)						2010 50	1000	
Jimmy Johns					on ID: 1( isbursemer		4939	
M. W. A.H				0 8 M	1 6	/ Y 3	0 1 0	Y
Mailing Address 3128 S. 6th St.				0 0	10		010	
City Springfield	State Zip Code IL 62703-			Amount of	f Each Disk	oursemer	nt this P	eriod
Purpose of Disbursement			_				48.32	
FOOD & BEVERAGE REIMB.		<u></u>	_					
Candidate Name		Category Type	y/					
Office Sought: House Disburse	ement For:	. , , pc		MEMO I	-	)	.055	
Senate	Primary General			ИЕМО: F ИВ.	FOOD & E	SEVERA	AGE R	⊏I-
President Pintriot:	Other (specify)							
State: District:								
SUBTOTAL of Disbursements This Page (optional)			•			12	07.23	

	CHEDULE B (FEC Form 3X)	Use separate schedule(s	)	FOR LINI		AGE 118 / 534
IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27	22 23 24 28a 28b 28c	25 29
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam					
\( \)	NAME OF COMMITTEE (In Full) Illinois Republican Party	e and address of any pointer	LI COII	illillitee to s	oncir contributions from such	Committee
<u>/</u>	Full Name (Last, First, Middle Initial) Jimmy Johns				Transaction ID: 10316 Date of Disbursement	3.E24940
	Mailing Address 3128 S. 6th St.				10 / 18 /	<sup>Y</sup> 2010 <sup>Y</sup>
	City Springfield	State Zip Code IL 62703-			Amount of Each Disburse	
	Purpose of Disbursement FOOD & BEVERAGE REIMB.		Г			49.32
	Candidate Name		С	ategory/ Type		
	Senate President	ement For: Primary General Other (specify)	<b>!</b>		MEMO: FOOD & BEV MB.	ERAGE REI-
	State: District: Full Name (Last, First, Middle Initial)				Transaction ID: 10316	E24041
	Mel-O-Cream				Date of Disbursement	
	Mailing Address 3010 South 6th St.				10000000	žoĭoř
	City Springfield	State Zip Code IL 62703-			Amount of Each Disburse	ement this Period
	Purpose of Disbursement FOOD & BEVERAGE REIMB.		Г		L	21.32
	Candidate Name		С	ategory/ Type		
	Office Sought:    House   Disburse     Senate     President     State: District:	ement For: Primary General Other (specify)	<b> </b>	.,,,,,	MEMO: FOOD & BEV MB.	ERAGE REI-
	Full Name (Last, First, Middle Initial) Mel-O-Cream				Transaction ID: 10316 Date of Disbursement	3.E24942
	Mailing Address 3010 South 6th St.				10 16 /	<sup>Y</sup> 2010 <sup>Y</sup>
	City Springfield	State Zip Code IL 62703-			Amount of Each Disburse	ement this Perior
	Purpose of Disbursement FOOD & BEVERAGE REIMB.				l	20.48
	Candidate Name		С	ategory/ Type		
	Senate President	ement For: Primary General Other (specify)			MEMO: FOOD & BEV MB.	ERAGE REI-
	State: District:					
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for each category of the Detailed Summary Page   X 21b   22   23   24   25   25   27   28   29   29   20   20   20   20   20   20	SCHEDULE B (FEC Form 3X)	Use separate schedule(s	1 -	NUMBER:	PAGE 119 / 534
NAME OF COMMITTEE (In Full)	ITEMIZED DISBURSEMENTS	for each category of the	X 21b	22 23	
NAME OF COMMITTEE (In Full) Illinois Republican Party  Full Name (Last, First, Middle Initial) Mel-O-Cream  Mailing Address 3010 South 6th St.  City Springfield IL 62703- Purpose of Disbursement POOD & BEVERAGE REIMB. Candidate Name  Office Sought: Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City Springfield State: District:  City Springfield Spring					
Mel-O-Cream  Mailing Address 3010 South 6th St.  City Springfield IL 62703- Purpose of Disbursement For Senate Primary General District:  Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City Springfield IL 62702-  City Senate Primary General Disbursement For Disbursement For Senate Primary General Disbursement For Disbursement District:  Full Name (Last, First, Middle Initial)  Walgreens  Mailing Address 1310 South 5th St.  City Springfield State Zip Code IL 62703-  Purpose of Disbursement BevERAGE ReIMB.  Category/ Type Disbursement BevERAGE ReIMB.  IMMO: BevERAGE ReIMB.  IMMO: BevERAGE ReIMB.	NAME OF COMMITTEE (In Full)	The and address of any political	i committee to se	mont contributions from	ii suur committee
City Springfield IIL 62703- Purpose of Disbursement FOOD & BEVERAGE REIMB. Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta Mailing Address 1168 E. Sangamon Avenue  City Springfield IIL 62702- Purpose of Disbursement For: Senate President District:  Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta Mailing Address 1168 E. Sangamon Avenue  City State Zip Code Springfield IIL 62702- Purpose of Disbursement For: Mailing Address Disbursement For: Senate Primary General Disbursement For: Senate Disbursement Disbursement For: Senate Disbursement For:					
Springfield IL 62703- Purpose of Disbursement FOOD & BEVERAGE REIMB. Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City Springfield IL 62702- Purpose of Disbursement FoOD & BEVERAGE REIMB. Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City Springfield IL 62702- Purpose of Disbursement FoOD & BEVERAGE REIMB. Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Walgreens  Mailing Address 1310 South 5th St.  City Springfield IL 62703- Purpose of Disbursement BeVERAGE REIMB. Candidate Name  Office Sought: House Springfield IL 62703- Purpose of Disbursement BEVERAGE REIMB. Candidate Name  Office Sought: House Springfield IL 62703- Purpose of Disbursement BEVERAGE REIMB. Candidate Name  Office Sought: House Senate President Other (specify) ▼  Other (specify) ▼  Disbursement For: Senate President Other (specify) ▼  MEMO: FOOD & BEVERAGE REIMB.  Transaction ID: 10316.E24945 Date of Disbursement this Period  Amount of Each Disbursement this Period  Type  (IMEMO ITEM] MEMO: FOOD & Amount of Each Disbursement this Period  Type  Office Sought: House Senate President Other (specify) ▼  Other (specify) ▼  Other (specify) ▼  MEMO: BeVERAGE REIMB.	Mailing Address 3010 South 6th St.			10 M / 2;	3 Y 2010 Y
FOOD & BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate Primary General Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Fulgenzis Place and Passident Springfield IL 62702-Purpose of Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Fulgenzis Primary General MB.  Transaction ID: 10316.E24944 Date of Disbursement In 10316.E24944 Date of Disbursement In 10316.E24944 Date of Disbursement In 10316.E24945 Date of Disbursement In 1				Amount of Each [	
Office Sought:	FOOD & BEVERAGE REIMB.				20.48
State: District: Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City Senate Primary General Disbursement For: Full Name (Last, First, Middle Initial) State: District: Pull Name (Last, First, Middle Initial)  Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City Springfield IL 62702- Purpose of Disbursement For: Primary General Primary General Disbursement For: District:  Full Name (Last, First, Middle Initial)  Mailing Address 1310 South 5th St.  City Springfield IL 62703-  Purpose of Disbursement For: Transaction ID: 10316.E24945 Date of Disbursement For: Amount of Each Disbursement this Period MB.  Transaction ID: 10316.E24945 Date of Disbursement Initial MB.  Transaction ID: 10316.E24945 Date of Disbursement ID: 10316.E24945 Date				IMEMO ITEMI	
Full Name (Last, First, Middle Initial) Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City Springfield IL 62702- Purpose of Disbursement FOOD & BEVERAGE REIMB. Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial) Walgreens  Mailing Address 1310 South 5th St.  City State Zip Code IL 62702- Primary General Other (specify)  Transaction ID: 10316.E24944  Date of Disbursement this Period  Amount of Each Disbursement this Period  [MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.  Transaction ID: 10316.E24945  Date of Disbursement  Mailing Address 1310 South 5th St.  Transaction ID: 10316.E24945  Date of Disbursement  Date of Disbursement  Transaction ID: 10316.E24945  Date of Disbursement  Date of Disbursement  Transaction ID: 10316.E24945  Date of Disbursement  Date of Disbursement  Transaction ID: 10316.E24945  Date of Disbursement  Date of Disbursement  Transaction ID: 10316.E24945  Date of Disbursement  Transaction ID: 10316.E24945  Date of Disbursement  Transaction ID: 10316.E24945  Date of Disbursement  Date of Disbursement  Transaction ID: 10316.E24945  Date of Disbursement  Tran	Senate President	Primary General		MEMO: FOOD	& BEVERAGE REI-
Fulgenzis Pizza & Pasta  Mailing Address 1168 E. Sangamon Avenue  City State Zip Code Springfield IL 62702-  Purpose of Disbursement FOOD & BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial) Walgreens  Mailing Address 1310 South 5th St.  City Springfield IL 62703-  Purpose of Disbursement For: State Zip Code Springfield IL 62703-  Purpose of Disbursement BEVERAGE REIMB.  Candidate Name  Office Sought: House State Zip Code Springfield IL 62703-  Purpose of Disbursement BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate President Senate President Senate President Senate President State: District:  District: MEMO ITEM]  MEMO: FOOD & BEVERAGE REIMB.  Category/ Type  IMEMO ITEM]  Amount of Each Disbursement this Period Senate President Senate President Other (specify) MEMO: BEVERAGE REIMB.					10010 501011
City State Zip Code   L 62702-   Amount of Each Disbursement this Period   Springfield   L 62702-   Springfield   L 62702-   Springfield   L 62702-   Senate   Senate   Primary   General   MEMO: FOOD & BEVERAGE REIMB.   Gardidate Name   Category/ Type   MEMO: FOOD & BEVERAGE REIMB.   Memo: Food & Memo: Food	,			Date of Disburser	ment
Springfield IL 62702-  Purpose of Disbursement FOCH Springfield Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: 10316.E24945 Date of Disbursement Boursement Boursement General Mailing Address 1310 South 5th St.  City State Zip Code Springfield IL 62703-  Purpose of Disbursement Beverage Reimb.  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Senate District:   District:   District:   District:   District:   Dispursement For: Senate Primary General Other (specify) ▼  Other (specify) ▼  Disbursement For: MEMO: Beverage Reimb.	Mailing Address 1168 E. Sangamon Av	enue		1"0 " / "0"	7 2010
FOOD & BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Walgreens  Mailing Address 1310 South 5th St.  City State Zip Code Springfield IL 62703-Purpose of Disbursement BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Primary General Other (specify) ▼  Office Sought: House Primary General Other (specify) ▼  State: District: Disbursement For: Senate Primary General Other (specify) ▼  State: District:				Amount of Each [	
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Walgreens  Mailing Address 1310 South 5th St.  City State Zip Code Springfield IL 62703-Purpose of Disbursement BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: Disbursement For: Senate Primary General Other (specify) ▼  State: District:   IMEMO ITEM] MEMO: FOOD & BEVERAGE REI-MB.  Transaction ID: 10316.E24945 Date of Disbursement  Mailing Address 1310 South 5th St.  Image: Memo ITEM] Memo ITEM] Memo: Beverage Reimb.  IMEMO: Beverage Reimb.  IMEMO: Beverage Reimb.	FOOD & BEVERAGE REIMB.		•		58.51
House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Walgreens  Mailing Address 1310 South 5th St.  City Springfield IL 62703-  Purpose of Disbursement BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  MEMO: FOOD & BEVERAGE REIMB.  Transaction ID: 10316.E24945 Date of Disbursement  10 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1				MEMO ITEMI	
Walgreens  Mailing Address 1310 South 5th St.  City State Zip Code Springfield IL 62703-  Purpose of Disbursement BEVERAGE REIMB.  Candidate Name  Office Sought: House Senate Primary General President State: District:  District: District: Date of Disbursement  Mailing Address 1310 South 5th St.  Amount of Each Disbursement this Period Sought Type  [MEMO ITEM]  MEMO: BEVERAGE REIMB.	Senate President	Primary General		MEMO: FOOD	& BEVERAGE REI-
Mailing Address 1310 South 5th St.  City State Zip Code Springfield IL 62703-  Purpose of Disbursement BEVERAGE REIMB.  Candidate Name Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:   I 0 12 2010  Amount of Each Disbursement this Period Category/ Type  [MEMO ITEM]  MEMO: BEVERAGE REIMB.					
Springfield  Purpose of Disbursement BEVERAGE REIMB.  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:    Disbursement For:	Mailing Address 1310 South 5th St.			10 12	2 2010
BEVERAGE REIMB.  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Disbursement For: MEMO ITEM] MEMO: BEVERAGE REIMB.				Amount of Each [	
Office Sought: House Senate Primary General Other (specify) ▼    State: District:   Type   [MEMO ITEM]   MEMO: BEVERAGE REIMB.	BEVERAGE REIMB.		0 0	L	30.37
Senate Primary General Other (specify) ▼  State: District:  Disbursement For:  MEMO: BEVERAGE REIMB.				MEMO ITEMI	
0.00	Senate President	Primary General			AGE REIMB.
SUBTOTAL of Disbursements This Page (optional)					0.00
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 120 / 534
ITEMIZED DISBURSEMENTS	for each category of the	(check only	y one)
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial)			T
Walgreens			Transaction ID: 10316.E24946  Date of Disbursement
Mailing Address 1310 South 5th St.			10  25  2010
City Springfield	State Zip Code IL 62703-		Amount of Each Disbursement this Period
Purpose of Disbursement BEVERAGE REIMB.		•	34.05
Candidate Name		Category/ Type	
Office Sought: House Disburs: Senate President	ement For: Primary General Other (specify)	.,,,,,	[MEMO ITEM] MEMO: BEVERAGE REIMB.
State: District:			
Full Name (Last, First, Middle Initial) Walgreens			Transaction ID: 10316.E24947 Date of Disbursement
Mailing Address 1310 South 5th St.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Springfield	State Zip Code IL 62703-		Amount of Each Disbursement this Period
Purpose of Disbursement BEVERAGE REIMB.			15.51
Candidate Name		Category/ Type	IMENO ITEM
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify)		[MEMO ITEM] MEMO: BEVERAGE REIMB.
State: District:			
Full Name (Last, First, Middle Initial) Head West Sub			<b>Transaction ID:</b> 10316.E24948 Date of Disbursement
Mailing Address 530 E Capitol Avenue			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Springfield	State Zip Code IL 62701-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			41.58
Candidate Name		Category/ Type	
Senate President	ement For:  Primary General  Other (specify)		[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
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SCHEDULE B (FEC Form 3X)	Lloo concrete cole di de (s.)	FOR LINE	NUMBER:	PAGE 121 / 534
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Illinois Republican Party				
Full Name (Last, First, Middle Initial) Head West Sub			Transaction ID: 10 Date of Disbursement	
Mailing Address 530 E Capitol Avenue			10 12	2010
•	State Zip Code IL 62701-		Amount of Each Disl	bursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.	1	•		37.26
Candidate Name		Category/ Type		
Senate President	ment For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & I MB.	BEVERAGE REI-
State: District: Full Name (Last, First, Middle Initial)				2010 501050
Head West Sub			Transaction ID: 10 Date of Disbursement	nt
Mailing Address 530 E Capitol Avenue			10 19	2010
,	State Zip Code IL 62701-		Amount of Each Disl	bursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.				55.35
Candidate Name		Category/ Type	IMEMO ITEMI	
Senate President	ment For: Primary General Other (specify)		[MEMO: FOOD & I MB.	BEVERAGE REI-
State: District: Full Name (Last, First, Middle Initial)				
Taco Gringo			Transaction ID: 10 Date of Disbursement	nt
Mailing Address 975 Clock Tower Drive			10 14	<sup>2</sup> 2010
•	State Zip Code IL 62704-		Amount of Each Disl	bursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.				34.83
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	Турс	[MEMO ITEM] MEMO: FOOD & I MB.	BEVERAGE REI-
State: District:	· · · · · (- - > · · · )			
SUBTOTAL of Disbursements This Page (optional) .				0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 21b 27	
Any Information copied from such Reports and States or for commercial purposes, other than using the name		by any person f	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Sams Club			Transaction ID: 10316.E24952 Date of Disbursement
Mailing Address 2300 White Oaks Dr.			$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 1 & 2 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
City Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.		•	135.13
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & BEVERAGE REI-MB.
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 10316.E24953
Sams Club  Mailing Address 2300 White Oaks Dr.			Date of Disbursement
	State Zin Code		
City Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			111.01
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburs Senate President	ement For:  Primary General  Other (specify) ▼		MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
Full Name (Last, First, Middle Initial) Schnucks			Transaction ID: 10316.E24954 Date of Disbursement
Mailing Address 2801 Chatham Rd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.		• •	28.19
Candidate Name		Category/ Type	IMEMO ITEM
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & BEVERAGE REI-MB.
State: District:			
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE I	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 3
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Schnucks			Transaction ID: 10316.E24955 Date of Disbursement
Mailing Address 2801 Chatham Rd.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.			101.69
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	,,	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:			
Full Name (Last, First, Middle Initial) Country Market			Transaction ID: 10316.E24956 Date of Disbursement
Mailing Address 1610 Wabash			$\begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix}$
City Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.	1	• •	44.50
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		[MEMO ITEM] MEMO: FOOD & BEVERAGE REI-MB.
State: District:  Full Name (Last, First, Middle Initial)			
Track Schack			Transaction ID: 10316.E24957 Date of Disbursement
Mailing Address 233 East Laurel St.			$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&0\end{smallmatrix}\end{bmatrix}^{/}\begin{bmatrix}\begin{smallmatrix}D&D&D\\2&1\end{smallmatrix}\end{bmatrix}^{/}\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}^{Y}$
City Springfield	State Zip Code IL 62704-		Amount of Each Disbursement this Period
Purpose of Disbursement FOOD & BEVERAGE REIMB.	52.01	]	118.80
Candidate Name	l	Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	.,,,,,	[MEMO ITEM] MEMO: FOOD & BEVERAGE REI- MB.
State: District:			

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SCHEDULE B (FEC Form 3X)	Use separate		FOR LIN			124	534				
ITEMIZED DISBURSEMENTS	for each categ Detailed Sum		 21b 27	F	22 28a	23 28	b	24 28c	F	25 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name											5
NAME OF COMMITTEE (In Full) Illinois Republican Party											
Full Name (Last, First, Middle Initial) Turaskys Meats					Date	of Disbu				4958 0 1 (	Y
Mailing Address 1129 Taintor Road					1 0		2	2	. 2	010	)
City Springfield		Code 2702-			Amou	int of Ea	ch	Disburse	-		-
Purpose of Disbursement FOOD & BEVERAGE REIMB.					L.		-		1	22.23	
Candidate Name			egory/ ype			IO ITE	N # 1				
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (specify)	General		- 1	-	<b>10 ITE</b> O: FO(	-	& BEVI	ΞRA	GE F	REI-
Full Name (Last, First, Middle Initial) Holiday Inn Select - Naperville						saction of Disbu		01130	.E2	4577	
Mailing Address 1801 Naper Blvd								5 /	Ž	0 1 C	) Y
City Naperville		Code 0563-			Amou	int of Ea	ch	Disburse	men	t this f	Period
Purpose of Disbursement Conference & Hotel Rooms					L.		-		66	00.38	3
Candidate Name		,	egory/ ype								
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (specify)	General ▼			CON	FEREN	ICE	E & HO1	ΓEL	ROO	MS
Full Name (Last, First, Middle Initial)					Trans	action	ID:	01130	.E2	4446	
Jerry King  Mailing Address 9 Hickory St						of Disbu	D.	ment 4	Ž	0 Ť (	) <sup>Y</sup>
City	State Zip	) Code				unt of Ec		Disburse			
Harrisburg		2946-3414			Amou	IIIL OI Ea	(CII	Disburse	-	00.33	
Purpose of Disbursement Food & Beverage Reimbursement		[				-			. 1	00.50	
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Senate President	ement For: Primary Other (specify)	General ▼			FOOI MEN		VE	RAGE	REI	MBUI	RSE-
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	CHEDULE B (FEC Form 3X)		arate schedule(s)			R LINE eck onl				PA	GE	125 /	/ 534		
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/	Illinois Republican Party														
<u>/_</u>	Full Name (Last, First, Middle Initial) Jerry King						l				01 ment		.E2	4548	
	Mailing Address 9 Hickory St						<b>1</b>	M I	′	<sup>D</sup> 1	<b>5</b>	Y	ž	0 i 0	) Y
	City Harrisburg	State IL	Zip Code 62946-3414				Amo	ount o	of Ea	ach	Disbu	urse	men	t this F	Period
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	Jerry King						Date	of D		urse	ment			4549	_
	Mailing Address 9 Hickory St						1 <sup>M</sup>	M I	′	<sup>D</sup> 1	<b>5</b>		ž	0 1 0	)
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	Full Name (Last, First, Middle Initial) Bryan Kinsey										01 ment		.E2	4216	
	Mailing Address 304 E Harrison Ave						1 M	) M	′	<sup>D</sup> 1	<b>4</b>	Y	ž	0 1 0	) <sup>Y</sup>
	City Wheaton	State IL	Zip Code 60187-4204				Amo	ount o	of E	ach	Disbu	urse	men	t this F	Period
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I \	Illinois Republican Party												
	Full Name (Last, First, Middle Initial)						Trans	actio	n ID:	011	30.E2	24466	
	Korman/ Lederer Management Co.						Date	_			V.		V
	Mailing Address 3100 Dundee Rd Ste Suite 3100	e 3100					1 <sup>M</sup> 0	M /	□2	6	, 2	2 0 1 c	)
	City Northbrook	State IL	Zip Code 60062-2437				Amou	int of	Each	Disbu	rsemei	nt this F	Period
	Purpose of Disbursement	IL.	00002-2437								Ş	950.00	)
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	Candidate Name				tegory ype	//							
	Senate President	bursement For: Primary Other (spec	General cify) ▼				RENT	-					
	State: District:												
	Full Name (Last, First, Middle Initial) Mool Law Firm LLC						Date	of Dis	sburse	ement		24267	. V
	Mailing Address P.O. Box 8624						1 <sup>M</sup> 0	M /	<sup>D</sup> 2	1 /	Y	žo i c	) \
	City Springfield	State IL	Zip Code 62791-				Amou	int of	Each	Disbu		nt this F	
	Purpose of Disbursement Legal Services										25	500.00	)
	Candidate Name				tegory ype	//							
	Office Sought: House Dis Senate President State: District:	bursement For: Primary Other (spec	General cify) ▼				LEGA	AL SI	ERVI	CES			
	Full Name (Last, First, Middle Initial) Neopost									011 ement	30.E2	24416	
	Mailing Address P.O. Box 73740						1 1			5 /	Y 2	žo i c	) <sup>Y</sup>
	City Chicago	State IL	Zip Code 60673-				Amou	ınt of	Each	Disbu	rsemei	nt this F	Period
	Purpose of Disbursement Generic Party Postage					$\neg$						77.72	2
	Candidate Name				tegory	//							
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SCHEDULE B (FEC Form 3X)	Lien congrate ashedula/s)	FOR LINE	E NUMBER: PAGE 127/5							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	- ·							
	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b						
Any Information copied from such Reports and Staten		any person f	or the purpose of soli	iciting contributions						
or for commercial purposes, other than using the name	e and address of any political co	mmittee to so	licit contributions fron	n such committee						
NAME OF COMMITTEE (In Full)										
/ Illinois Republican Party										
Full Name (Last, First, Middle Initial) Network Business Systems, Inc.			Transaction ID: Date of Disbursen	nent						
Mailing Address 23834 East 1260th St.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 Y Y Y Y Y Y						
City Geneseo	State Zip Code IL 61254-		Amount of Each D	Disbursement this Period						
Purpose of Disbursement				475.00						
Internet/Network Support Candidate Name		Category/								
Candidate marie		Type								
Senate President	ement For: Primary General Other (specify)		INTERNET/NET	WORK SUPPORT						
State: District:  Full Name (Last, First, Middle Initial)										
Nicor Gas			Transaction ID: Date of Disbursen	nent						
Mailing Address P.O. Box 0632			111 / 15	2010						
City Aurora	State Zip Code IL 60507-0632		Amount of Each D	Disbursement this Period						
Purpose of Disbursement Utilities		• •		213.93						
Candidate Name		Category/ Type								
Senate President	ement For: Primary General Other (specify)		UTILITIES							
State: District: Full Name (Last, First, Middle Initial)										
The Northern Trust Company			Transaction ID: Date of Disbursen	nent						
Mailing Address 50 S La Salle St			10 / 12	2010						
City Chicago	State Zip Code IL 60603-1006		Amount of Each D	Disbursement this Period						
Purpose of Disbursement				22.00						
Service Fee Candidate Name		Category/ Type								
Senate President	ement For: Primary General Other (specify)	Nr	SERVICE FEE							
State: District:										
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		710.93						

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ITEMIZED DISBURSEMENTS    See Separate Scriedule(3)   (check only one)	г <b>П</b> ос
	5 26 9 30b
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribut or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such commit	
NAME OF COMMITTEE (In Full)	
Illinois Republican Party	
Full Name (Last, First, Middle Initial)  The Northern Trust Company  Transaction ID: 01130.E244  Date of Disbursement	62
Mailing Address 50 S La Salle St	10
City State Zip Code Amount of Each Disbursement the Chicago IL 60603-1006	nis Period
Purpose of Disbursement Service Fee	.50
Candidate Name  Category/ Type	
Office Sought:  House Senate Primary Other (specify)  State:  Disbursement For: SerVICE FEE  SerVICE FEE  Other (specify)  SerVICE FEE	
Full Name (Last, First, Middle Initial) Transaction ID: 01130.E242	75
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Mailing Address 50 S La Salle St	10
City State Zip Code Amount of Each Disbursement the Chicago IL 60603-1006	
Purpose of Disbursement Service Fee	2.00
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F. J. Marco, A. et al. Front Middle 1979.	
The Northern Trust Company  Date of Disbursement	
Mailing Address 50 S La Salle St	10°
City State Zip Code Amount of Each Disbursement the Chicago IL 60603-1006	
Purpose of Disbursement Service Fee	7.00
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Office Sought:  House Senate Primary President  Disbursement For: Primary General Other (specify) ▼	
State: District:	
SUBTOTAL of Disbursements This Page (optional)	.50

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 129 / 534
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NAME OF COMMITTEE (In Full)	e and address of any political	Committee to so	oncit contributions from such committee
Illinois Republican Party			
Full Name (Last, First, Middle Initial) The Northern Trust Company			Transaction ID: 01130.E24475 Date of Disbursement
Mailing Address 50 S La Salle St			$\begin{bmatrix} \begin{smallmatrix} M \\ 1 \end{smallmatrix} 0^{M} & \begin{smallmatrix} D \\ 2 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} \begin{bmatrix} \begin{smallmatrix} V \\ 2 \end{smallmatrix} 0 & \begin{smallmatrix} V \\ 1 \end{smallmatrix} 0^{V} \end{bmatrix}$
City Chicago	State Zip Code IL 60603-1006		Amount of Each Disbursement this Period
Purpose of Disbursement Service Fee			22.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		SERVICE FEE
Full Name (Last, First, Middle Initial)			T ID .04400 F04000
The Northern Trust Company			Transaction ID: 01130.E24289  Date of Disbursement
Mailing Address 50 S La Salle St			10
Chicago	State Zip Code IL 60603-1006		Amount of Each Disbursement this Period 22.00
Purpose of Disbursement Service Fee Candidate Name		Category/	22.00
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Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		SERVICE FEE
Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24291
The Northern Trust Company			Date of Disbursement
Mailing Address 50 S La Salle St			10 M / D 2 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State         Zip Code           IL         60603-1006		Amount of Each Disbursement this Period
Purpose of Disbursement Service Fee			22.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		SERVICE FEE
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TOTAL This Period (last page this line number only)		<b>&gt;</b>	

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Illinois Republican Party													
Full Name (Last, First, Middle Initial) The Northern Trust Company							Trans Date o		sburse		.E2	4370	
Mailing Address 50 S La Salle St							10	M /	<sup>D</sup> 2	9 / Y	ž	0 1 (	) <sup>Y</sup>
City Chicago		o Code 0603-1006					Amou	nt of	Each	Disburse	-		-
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Palatine Township GOP							Date of	of Di		ement	, , ,	0 1 (	Y
Mailing Address 839 N. Quentin Road							1 0	_		. 0		010	,
City Palatine		o Code 0067-					Amou	nt of	Each	Disburse			-
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Peapod Delivery						- 1	Date o	of Di	sburse	ement			
Mailing Address 9933 Woods Drive							10	M /	<sup>D</sup> 2	D / Y	ž	0 1 (	) <sup>Y</sup>
City Skokie		o Code 0077-					Amou	nt of	Each	Disburse	men	t this I	Period
Purpose of Disbursement Office Supplies			_		$\overline{}$				_		_ 1	68.56	5
Candidate Name				egor	ry/								
Office Sought: House Disburs Senate President	ement For: Primary Other (specify)	General				(	OFFIC	CE S	SUPF	PLIES			
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SUBTOTAL of Disbursements This Page (optional)											4	40.56	

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<u></u>	Full Name (Last, F PKL Consulting	First, Middle Initial)							action II		30.E2	4296	
	Mailing Address	611 Thornwood	Ln					10	M / D	28	y y	0 1 0	Y
	City Northfield		S II	tate	Zip Code 60093-1135			Amou	nt of Eac	h Disbur		-	erio
	Purpose of Disbur Party Fundraising Candidate Name						ategory/				201	00.00	•
	Office Sought: State:	House Senate President District:		nent For: Primary Other (spe	General cify) ▼		Туре	PART ING F	Y FUNI EE	DRAISII	NG CC	ONSU	LT-
	Full Name (Last, F Randy Pollard	First, Middle Initial)						Date o	action II of Disbur	sement	30.E2	4503	
	Mailing Address	2517 Mabry Ln						1 <sup>M</sup> 0	M / D	28 <sup>D</sup>	y y	0 1 0	Υ
	City Vandalia		S II	tate	Zip Code 62471-3710			Amou	nt of Eac	h Disbur	sement	t this P	erio
	Purpose of Disbur Travel Reimburse Candidate Name					Ca	ategory/	L.	0 0		.30	06.26	
	Office Sought:	House Senate President District:		nent For: Primary Other (spe	General cify) ▼		Гуре	TRAV	EL REI	MBURS	SEMEN	NT	
	Full Name (Last, F Randy Pollard	First, Middle Initial)						Date of	action II	sement			V
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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or for commercial purposes, other than using the nar	ne and address of any political of	committee to sol	licit contributions from such committee
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Randy Pollard			Transaction ID: 01130.E24504 Date of Disbursement
Mailing Address 2517 Mabry Ln			$\begin{bmatrix} \begin{smallmatrix} M & O & M \\ 1 & O & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{bmatrix}$
City Vandalia	State Zip Code IL 62471-3710		Amount of Each Disbursement this Period
Purpose of Disbursement Phone Supplies & Setup			86.08
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼		PHONE SUPPLIES & SETUP
Full Name (Last, First, Middle Initial) Printing Ltd			Transaction ID: 01130.E24464 Date of Disbursement
Mailing Address 101 E Main Cross St			10 M / D B / Y 2010 Y
City Taylorville	State         Zip Code           IL         62568-2225		Amount of Each Disbursement this Period
Purpose of Disbursement Party Printing NonCandidate			140.00
Candidate Name		Category/ Type	
Senate President	sement For: Primary General Other (specify)		PARTY PRINTING NONCANDIDA- TE
State: District:  Full Name (Last, First, Middle Initial)			T .: ID 04400 F04504
Printing Ltd			Transaction ID: 01130.E24521 Date of Disbursement
Mailing Address 101 E Main Cross St			111
City Taylorville	State Zip Code IL 62568-2225		Amount of Each Disbursement this Period
Purpose of Disbursement Party Printing NonCandidate			719.49
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	sement For: Primary General Other (specify) ▼	. , , p -	PARTY PRINTING NONCANDIDA- TE
State: District:			
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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for commercial purposes, other than using the name and address of any political committee in soliciting contributions from such committee.  NAME OF COMMITTEE (In Full)  Illinois Republican Party  Full Name (Last, First, Middle Initial)  Volunteers for Shimkus  Mailing Address PO Box 661  City Springfield State Zip Code Springfield Amount of Each Disbursement this Period  Candidate Name  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Office Sought: Siate Zip Code East Peoria IL 61611-4511  Purpose of Disbursement Cardidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  Transaction ID: 01130,E24219 Date of Disbursement Capp Print Supplies Power Strips Candidate Name  Office Sought: House Senate Prinary General  District:  Full Name (Last, First, Middle Initial)  Transaction ID: 01130,E24219 Date of Disbursement Capp Print Supplies Power Strips Cardidate Name  Office Sought: House Senate Prinary General  District:  Full Name (Last, First, Middle Initial)  Typer Sidel  Mailing Address 109 Kay Ct  City State: District:  Full Name (Last, First, Middle Initial)  Typer Sidel  Mailing Address 109 Kay Ct  City State: District:  Full Name (Last, First, Middle Initial)  Typer Sidel  Mailing Address 109 Kay Ct  City State: District:  Full Name (Last, First, Middle Initial)  Types Office Sought: House Senate Prinary General  Category' Type  Office Sought: House Senate Prinary General  Category' Type  Office Sought: House Senate Prinary General  Food & Besverage Reimbursement Candidate Name  Office Sought: House Senate Prinary General  Food & Besverage Reimbursement Candidate Name  Office Sought: House Senate President  Disbursement For: Senate Prinary General  Food & Besverage Reimbursement Candidate Name  Office Sought: House Senate President  Disbursement For: Senate Prinary General  Disbu	TEMIZED DISBURSEMENTS	for each category of the		25 🗆 26
NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) NAME (Last, First, Middle Initial) Volunteers for Shimkus Mailing Address PO Box 661  City Springfield Cardidate Name Office Sought: Full Name (Last, First, Middle Initial) Transaction ID: C322934IK Date of Disbursement this Period Disbursement Trimay Office Sought: Full Name (Last, First, Middle Initial) Typer Sidell Mailing Address 109 Kay Ct  City State District: Full Name (Last, First, Middle Initial) Typer Sidel Mailing Address Togs President State: District: Full Name (Last, First, Middle Initial) Typer Sidel Mailing Address Togs President State: District: Full Name (Last, First, Middle Initial) Typer Sidel Mailing Address Togs President State: District: Full Name (Last, First, Middle Initial) Typer Sidel Mailing Address Togs Primary General Disbursement For: Cardidate Name Cardidate Name  Office Sought: Full Name (Last, First, Middle Initial) Typer Sidel Mailing Address Togs Primary General Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) Typer Sidel Mailing Address Togs Primary General Disbursement For: Senate President Disbursement For: Cardidate Name  Office Sought: House Senate Disbursement Tipe Sidel  Amount of Each Disbursement this Period Disbursement Tipe Sidel  Amount of Each Disbursement this Period Type  Office Sought: Amount of Each Disbursement this Period Type Office Sought: House Senate Primary General Other (specify) Type  Office Sought: House President Other (specify) Type  Office Sought: Food & Beverage Reimbursement Candidate Name Office Sought: House President Other (specify) Type		Detailed Summary Page		
Full Name (Last, First, Middle Initial)  Volunteers for Shirmkus  Mailing Address PO Box 661  City Springfield State Zip Code (B. 2705-0661)  Purpose of Disbursement Airfare - American Airlines  Candidate Name  Office Sought: House President State Disbursement For: Senate Primary General Relation ID: 01130.E24219  Disbursement For: Senate Primary General General Primary General Relation ID: 01130.E24219  Disbursement General Primary General Relation ID: 01130.E24219  Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Tyler Sidell  Mailing Address 109 Kay Ct  City Senate President State Zip Code General President State: District:  Full Name (Last, First, Middle Initial) Tyler Sidell  Mailing Address 109 Kay Ct  City Senate President State Zip Code General President State District:  Full Name (Last, First, Middle Initial) Tyler Sidell  Mailing Address 109 Kay Ct  City Senate President State Zip Code General President State Senate President Senate Sen				
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Springfield IL 62705-0661  Purpose of Disbursement Airfare - American Airfines  Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial) Tyler Sidell  Mailing Address 109 Kay Ct  City State Disbursement For: Senate Purpose of Disbursement For: Senate President Senate District:  Full Name (Last, First, Middle Initial) Tyler Sidell  Mailing Address 109 Kay Ct  City State Zip Code East Peoria IL 61611-4511 Purpose of Disbursement Copy/Print Supplies Power Strips  Candidate Name  Office Sought: House Senate President District:  Full Name (Last, First, Middle Initial) Tyler Sidell  Mailing Address 109 Kay Ct  Transaction ID: 01130.E24218 Date of Disbursement this Period  COPY/PRINT SUPPLIES POWER  STRIPS  Transaction ID: 01130.E24218 Date of Disbursement For: Senate District:  Full Name (Last, First, Middle Initial) Tyler Sidell  Mailing Address 109 Kay Ct  City State Zip Code IL 61611-4511  Purpose of Disbursement  Code East Peoria IL 61611-4511  Purpose of Disbursement  Food & Beverage Reimbursement  Candidate Name  Disbursement For: Senate Primary General Category' Type  Office Sought: House Senate Primary General Category' Type  Office Sought: President Disbursement For: Senate Primary General Category' Type  Office Sought: President Disbursement For: Primary General Category' Type  Other (specify) ▼	Mailing Address PO Box 661		111 / D10 / Y 20	) 1 0 °
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Full Name (Last, First, Middle Initial)  Tyler Sidell  Mailing Address 109 Kay Ct  City State Zip Code East Peoria IL 61611-4511  Purpose of Disbursement Food & Beverage Reimbursement  Candidate Name  Disbursement For: Senate Primary General Other (specify)  Code Category/ Type  Transaction ID: 01130.E24218  Date of Disbursement  Amount of Each Disbursement this Period  Category/ Type  FOOD & BEVERAGE REIMBURSE- MENT  FOOD & BEVERAGE REIMBURSE- MENT	Senate President	Primary General	COPY/PRINT SUPPLIES PO	OWER
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East Peoria IL 61611-4511  Purpose of Disbursement Food & Beverage Reimbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President  President  Disbursement For:  Senate Primary General Other (specify)   Tood & BEVERAGE REIMBURSE-MENT	Mailing Address 109 Kay Ct		10 M / D D / Y 20	) 1 0 °
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Senate Primary General FOOD & BEVERAGE REIMBURSE-MENT  President Other (specify) ▼		-	9 ,	
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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NAME OF COMMITTEE (In Full) Illinois Republican Party	,,		
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Tyler Sidell			Date of Disbursement
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Mailing Address 1683 Constitution Dr								M M / D D D / Y Y Y O Y O Y										
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		tatements may not be sold or used by any person for the purpose of soliciting contribution name and address of any political committee to solicit contributions from such committee.										s							
\	NAME OF COMMITTEE (In Full)	c and addres	33 of any political c		inte		mon oc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Juli	0113 11	1011	1 300		milloc					
$ \rangle$	Illinois Republican Party																		
	Full Name (Last, First, Middle Initial) Joe Weiss								Transaction ID: 01130.E24305 Date of Disbursement										
	Mailing Address 1683 Constitution Dr						10 M / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y												
	City Glenview	State IL	Zip Code 60026-7705				Amount of Each Disbursement this									od			
	Purpose of Disbursement Websites			_			L		0					61.6	1	_			
	Candidate Name			Cate	ego														
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General cify) ▼				WE	BS	ITI	≣S									
_	State: District:																		
	Full Name (Last, First, Middle Initial) Joe Weiss									on ID sburs			30.E2	24390					
	Mailing Address 1683 Constitution Dr							1	4	D	1 5	)	Y	ž 0 1 (	0 <sup>Y</sup>				
	City Glenview	State IL	Zip Code 60026-7705				An	our	nt of	Eacl	h D	isbur	ursement this Period						
	Purpose of Disbursement Websites Parking Food & Bevg.Reimb.						L		-			_		193.83	3				
	Candidate Name			Cate	ego														
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ccify) ▼				WE BE	BS VG	ITI .RE	ES PARKING FOOD & EIMB.					ķ				
_	State: District:																		
	Full Name (Last, First, Middle Initial) West Bend Mutual Insurance					Da	te o	f Di	sburs	en	nent		24463						
	Mailing Address 188 Industrial Dr., Ste. 4	30					1	0 ^	1	D	1 8	3 /	Y	ž 0 1 (	0 \				
	City Elmhurst	State IL	Zip Code 60126-				An	our	nt of	Eacl	h D	isbur		nt this		od			
	Purpose of Disbursement Insurance						L			-				114.00	Ò	_			
	Candidate Name			Cate	ego														
	Senate President	ement For: Primary Other (spe	General cify)				INS	SUF	RAN	ICE									
_	State: District:															_			
1	SUBTOTAL of Disbursements This Page (optional)									-				69.4	1	_			

State:

A.

District:

	<b>-</b> 010															
SCHEDULE B (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page  FOR LINE (check on X 21b 27				INE NUMBER: PAGE 140 /										
ITEMIZED DISBURS	SEMENTS					21b	П	22 28a	ш	23 28b	Н	24 28c	Н	25 29	П	26 30b
Any Information copied from su or for commercial purposes, oth		•		•	•				•			_				
NAME OF COMMITTEE (I Illinois Republican Part	,															
Full Name (Last, First, Midd Mike Zolnierowicz  Mailing Address 3648	le Initial) Venard Rd							Trans Date o		burse	_			4561 0 1 0	Y	
City Downers Grove Purpose of Disbursement Telephone Expenses		State IL	Zip Code 60515-1349		•	•		Amou	nt of	Each	Dis	burser		this F		d
Candidate Name				1	ateg Typ	ory/ e										
Office Sought: Hou Sen		ment For: Primary Other (spe	General					TELEI	PHC	NE I	EXF	PENS	ES			

CURTOTAL of Diskurserserts This Days (antique)		840.96
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5(	CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 141 / 534	
Τ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl	X   22	
	y Information copied from such Reports and Stat for commercial purposes, other than using the na		, , ,		
$\overline{\ }$	NAME OF COMMITTEE (In Full)				
/	Illinois Republican Party				
	Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24283	
	National Republican Senatorial Comm.			Date of Disbursement	
	Mailing Address 425 - 2nd St., N.E.			10 M / D 2 6 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Washington	State         Zip Code           DC         20002-4914		Amount of Each Disbursement this Period	_
	Purpose of Disbursement Transfer			35000.00	
	Candidate Name		Category/ Type		
		sement For:			
	Senate President	Primary General Other (specify) ▼			
	State: District:	Other (specify)			

		25000.00
SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	35000.00
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5(	CHEDULE B (FEC Form 3)	() Use separa	ate schedule(s)		OR LIN			R:		PAGE 142 / 534					
IT	EMIZED DISBURSEMENTS		for each category of the Detailed Summary Page				22 28a	نئا	23 28b		24 28c	П	25 29	Н	26 30b
	y Information copied from such Reports and for commercial purposes, other than using	•			•			•			_				
$\rangle$	NAME OF COMMITTEE (In Full) Illinois Republican Party														
	Full Name (Last, First, Middle Initial) Pollak For Congress  Mailing Address P.O. Box 5027						Trans Date of	of Dis	burse				1368 0 1 0	Υ	
	City Evanston Purpose of Disbursement CONTRIBUTION		Zip Code 60204-	v			Amou	nt of	Each	Disb	oursen		this P	erio	d
	Candidate Name JOEL BARRY POLLAK			Categ Typ	•										
	Senate President	Disbursement For: Primary Other (speci	2010 X General fy) ▼				CONT	ΓRIB	UTIC	N					
	State: IL District: 09														

SUBTOTAL of Disbursements This Page (optional)	<b>&gt;</b>	800.00
TOTAL This Period (last page this line number only)	<b>—</b>	800.00

SCHEDULE B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 143 / 534		
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	y one) 22 23 24 25 26 28a 28b 28c X 29 30b	
	y Information copied from such Reports and State for commercial purposes, other than using the nar				
$\rangle$	NAME OF COMMITTEE (In Full) Illinois Republican Party				
	Full Name (Last, First, Middle Initial) Champaign County for Bill Brady PAC			Transaction ID: 01130.E24461 Date of Disbursement	
	Mailing Address 602 East Green Street Suite 2A1			10 M / 15 / Y Y Y Y Y Y	
	City Champaign	State Zip Code IL 61820-		Amount of Each Disbursement this Period	
	Purpose of Disbursement TRANSFER			5000.00	
	Candidate Name		Category/ Type		
	Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify)			

SUBTOTAL of Disbursements This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	5000.00

SCHEDULE B (FEC Form 3X)	Lice congrate cohedule(c)	LINE NUMBER: PAGE 144 / 534 ck only one)
ITEMIZED DISBURSEMENTS	for each category of the	11b 22 23 24 25 26
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full)		
Illinois Republican Party		
Full Name (Last, First, Middle Initial)		Transaction ID: 01130.E24516
Volunteers for Shimkus		Date of Disbursement
Mailing Address PO Box 661		111 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	State Zip Code	Amount of Each Disbursement this Period
Springfield	IL 62705-0661	05000.00
Purpose of Disbursement		25000.00
Refund of Contribution	010	
Candidate Name JOHN M SHIMKUS	Category Type	y/
Office Sought: X House Disburse	ment For:	
Senate	Primary General	
President	Other (specify)	
State: II District: 19		

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	25000.00
TOTAL This Period (last page this line number only)	•	25000.00

	CHEDULE B (FEC FOIIII 3X)	Use separate			₹LINE ck only	NUMBE	H:		L	PAGE	145	/ 534
	EMIZED DISBURSEMENTS	for each cated Detailed Sum	mary Page		21b 27	22 28a		23 28b		8c	25 29	X
	y Information copied from such Reports and State or commercial purposes, other than using the na											
	NAME OF COMMITTEE (In Full) Illinois Republican Party		, p									
<u>/</u>	Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	011	30.E	24358	<u> </u>
	James Adinamis					Date	of Dis	burse	ement			
	Mailing Address 555 W. Cornelia					1 <sup>M</sup> 0	M /	<sup>D</sup> 2	8 /	Y	ž 0 Ť	0 1
	City		Code			Amou	nt of	Each	Disbu	rseme	nt this	Period
	Chicago	IL 60	)657-							1.	300.0	0
	Purpose of Disbursement FEA Coslting. Political Grassroots								-	• •	,	
	Candidate Name			tego ype	ry/							
	Senate President	sement For: Primary Other (specify)	General			FEA (	CNS SSR	LTIN	G. PO	OLITI	CAL	
	State: District: Full Name (Last, First, Middle Initial)											
	Adlexx Corporation					Trans Date				30.E	24288	}
	Mailing Address PO Box 9594					1 <sup>M</sup> 0	M /	<sup>D</sup> 2	<sup>D</sup> 7	Y	2 0 1	0 <sup>Y</sup>
;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	City Springfield		Code 2791-9594			Amou	nt of	Each	Disbu	rseme	nt this	Perio
	Purpose of Disbursement FEA Volunteer Mail-Dold	IL 02	1791-9394		$\neg$					23	250.0	0
	Candidate Name			tego ype	ry/							
	Office Sought: House Senate President State: District:	sement For: Primary Other (specify)	General	урс		FEA \	/OL	UNTE	EERI	MAIL-	DOLE	)
	Full Name (Last, First, Middle Initial) Allstar Computer Mailing Services					Trans				30.E	24242	)
	Mailing Address 980 W. Hawthorne Lan	е				1 <sup>M</sup> 0	M /	<sup>D</sup> 1	8 /	Υ	ž 0 Ť	0 <sup>Y</sup>
	City West Chicago		Code 0185-			Amou	nt of	Each	Disbu	rseme	nt this	Perio
	Purpose of Disbursement FEA Volunteer Mail-Hultgren	00			$\neg$		_			2	017.4	0
	Candidate Name			tego ype	ry/							
	Office Sought: House Disbur Senate President State: District:	Primary Other (specify)	General ▼			FEA \	/OL	UNTE	EERI	MAIL-	HULT	GR-
	JBTOTAL of Disbursements This Page (optiona						-				67.4	

		3 (FEC Form	-		arate schedule(s)			R LINE	NUMBI	ER:		L	PAGE	146	5 / 534
		SBURSEMEN		Detailed	category of the Summary Page		À	21b 27	22 28a		23 28b		8c	25 29	X
		ed from such Reports poses, other than using													
\ NA		ИІТТЕЕ (In Full)	ig the name	and addre	ss of any political	COM		56 10 30	JICIT COIT	nouti	0113 11	om su	JII COIII	muce	7
	ıll Name (Last, İlstar Comput							: 011 ement	30.E2	24281	1				
Ma	ailing Address	980 W. Hawtho	rne Lane						1 <sup>M</sup> 0		D 2	25	Y	2 0 1	0
Cit W	ty /est Chicago			State IL	Zip Code 60185-				Amo	unt of	Each	Disbu			
	urpose of Disbu EA Volunteer M						v		L.				3	755.1	2
_	andidate Name						atego Type								
	ffice Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General ecify) ▼				FEA EN	VOL	UNT	EER I	MAIL-	HUL7	ΓGR-
Fu	State: District:  Full Name (Last, First, Middle Initial)  Allstar Computer Mailing Services											: 011	30.E2	24308	 3
All	Istar Comput	er Mailing Service	S 						М	M		ement	Y	Y Y	Y
Ma —	ailing Address	980 W. Hawtho	rne Lane						1 0			2 8		ž o ť	0
Cit W	ty 'est Chicago			State IL	Zip Code 60185-				Amo	unt of	Each	Disbu	rseme	nt this	Perio
FE	urpose of Disbu EA Volunteer M								l L.				18	377.5	6
Ca	andidate Name						atego Type								
	ffice Sought:	House Senate President District:	Disburse	ment For: Primary Other (sp	General ecify) ▼				FEA EN	VOL	UNT	EER I	MAIL-	HULT	ΓGR-
Fu		First, Middle Initial)	L									: 011 ement	30.E2	24527	7
Ma	ailing Address	121 C Street, S	E						1 1	М	D 1	1 1 /	Y	ž o ž	0 <sup>Y</sup>
Cit W	ty /ashington			State DC	Zip Code 20003-				Amo	unt of	Each	Disbu	rseme	nt this	Perio
Pu	Purpose of Disbursement FEA Travel Reimbursement												, ;	333.0	00
Ca	andidate Name					atego Type	-								
Of	ffice Sought:	House Senate President	Disburse	ment For: Primary Other (sp	General				FEA	TRA	VEL	REIM	BURS	SEME	ENT
	ate:	District:		(20	<i>J</i> / <b>▼</b>										
Sta															

В.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	21 1 1		NUMBER:	PAGE 147 / 534
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	´   _	check onl	y one) 22 23	☐ 24 ☐ 25 ☐ 26
	Detailed Summary Fage		27	28a 28b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Illinois Republican Party					
Full Name (Last, First, Middle Initial) Flavio Amaya				Transaction I Date of Disbu	<b>D</b> : 01130.E24424 rsement
Mailing Address 1602 Hobart St. NW				10 /	2010
,	State Zip Code DC 20009-			Amount of Eac	ch Disbursement this Period
Purpose of Disbursement FEA Cnslting: Political Grassroots					1666.66
Candidate Name			egory/ ype		
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼			FEA CNSLTI GRASSROC	ING: POLITICAL ITS
Full Name (Last, First, Middle Initial)				Transaction I	<b>D</b> : 01130.E24487
Flavio Amaya				Date of Disbu	
Mailing Address 1602 Hobart St. NW				1 0 /	28 7 2010
	State Zip Code DC 20009-			Amount of Eac	ch Disbursement this Period
Purpose of Disbursement FEA Constring: Political Grassroots	20009-		-		1666.66
Candidate Name			egory/ ype		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	•		FEA CNSLTI GRASSROC	ING: POLITICAL ITS
State: District: Full Name (Last, First, Middle Initial)					D 04400 F04500
Flavio Amaya				Date of Disbu	
Mailing Address 1602 Hobart St. NW				1"1 "	2 1 5
	State Zip Code DC 20009-			Amount of Eac	ch Disbursement this Period
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots					1666.66
Candidate Name			egory/ ype		
Office Sought:    House   Disburse     Senate     President     State: District:	ment For: Primary General Other (specify)			FEA CNSLTI ROOTS	NG: POLIT. GRASS-
SUBTOTAL of Disbursements This Page (optional) .			. •		4999.98
TOTAL This Period (last page this line number only)			. •		

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s	(check on	E NUMBER: PAGE 148 / 534
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28 28a 28b 28c 29 X
Any Information copied from such Reports and Stator for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)	arie and address of arry pointed	ai committee to s	olicit contributions from such committee
Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24317
John Arrington			Date of Disbursement
Mailing Address 31 E. 155th St.			
City	State Zip Code		Amount of Each Disbursement this Perio
Harvey Purpose of Disbursement	IL 60426-		1500.00
FEA Cnslting. Political Grassroots			
Candidate Name		Category/ Type	
Senate President	rsement For: Primary General Other (specify)	•	FEA CNSLTING. POLITICAL GRASSROOTS
State: District:			
Full Name (Last, First, Middle Initial) Joy Arrington			Transaction ID: 01130.E24315 Date of Disbursement
Mailing Address 31 E. 155th St.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Harvey	State Zip Code IL 60426-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots			1500.00
Candidate Name		Category/ Type	
Office Sought: House Disbut Senate President State: District:	rsement For: Primary General Other (specify)		FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Katie Bachman			Transaction ID: 01130.E24277 Date of Disbursement
Mailing Address 1028 N. Honore Street			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Chicago	State Zip Code IL 60622-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots			750.00
Candidate Name		Category/ Type	
Senate President	rsement For: Primary General Other (specify)	•	FEA CNSLTING. POLITICAL GRASSROOTS
State: District:			
			3750.00

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s	(check or	E NUMBER: PAGE 149 / 534
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c 29 X
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)  Illinois Republican Party	and address of any pointed		olor contributions from soon committee
Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24324
Vernon Bennett			Date of Disbursement
Mailing Address 7647 S. Aberdeen			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code		Amount of Each Disbursement this Period
Chicago  Burness of Dishursement	IL 60620-	1	1500.00
Purpose of Disbursement FEA CnsIting. Political Grassroots			
Candidate Name		Category/ Type	
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)		FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24340
Bob Black			Date of Disbursement
Mailing Address 119 S. School St.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Mount Prospect	State Zip Code IL 60056-		Amount of Each Disbursement this Period
Purpose of Disbursement FEA CnsIting. Political Grassroots			1500.00
Candidate Name		Category/ Type	
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)		FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Jonathan Blessing			Transaction ID: 01130.E24425 Date of Disbursement
Mailing Address 1518 N Sedgwick St U Unit B	nit B		$\begin{bmatrix} 1 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 & 0 &$
City Chicago	State Zip Code IL 60610-1223	3	Amount of Each Disbursement this Perio
Purpose of Disbursement FEA CnsIting: Political Grassroots			2500.00
Candidate Name		Category/ Type	
Senate President	rsement For: Primary General Other (specify) ▼		FEA CNSLTING: POLITICAL GRASSROOTS
State: District:			
	al)		5500.00

S	CHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBER:		PAGE	150 /	534	
IT	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check online) 21b 27	22 28a	23 28b	24 28c	25 29	26 X 30	
	ny Information copied from such Reports and Staten								3	
	NAME OF COMMITTEE (In Full)  Illinois Republican Party	e and address of any political	COMM	iiilee lo sc	Mett contribe	uons mom	Such com			
<b>∠</b> 4.	Full Name (Last, First, Middle Initial) Jonathan Blessing					tion ID: Disbursem	01130.E2 ent	4476		
	Mailing Address 1518 N Sedgwick St Unit Unit B	Unit B								
	Chicago	State         Zip Code           IL         60610-1223			Amount	of Each D	isbursemer			
	Purpose of Disbursement FEA Consting: Political Grassroots Candidate Name		Cate	egory/		0 0		500.00		
	Senate President	ement For: Primary General Other (specify)		уре	FEA CN GRASS	SLTING ROOTS	: POLITIC	CAL		
В.	State: District:  Full Name (Last, First, Middle Initial)  Jonathan Blessing					Disbursem		4530		
	Mailing Address 1518 N Sedgwick St Unit Unit B	t B			1 1 M	15	/ Y 2	010	) <sup>Y</sup>	
	City Chicago	State         Zip Code           IL         60610-1223			Amount	of Each D	isbursemer			
	Purpose of Disbursement FEA Cnslting: Polit.Grassroots Candidate Name		Cot	200m/		•	85	00.00		
		ement For:		egory/ ype					_	
	Senate President State: District:	Primary General Other (specify) ▼			ROOTS	SLIING	: POLIT.(	iRAS:	S-	
Э.	Full Name (Last, First, Middle Initial) Lynne Boehringer				Date of [	Disbursem			v	
	Mailing Address 1430 N. Astor #8B				10	<sup>/</sup> 28		2 0 1 C	)	
	Chicago	State Zip Code IL 60610-			Amount	of Each D	isbursemer	nt this F		
	Purpose of Disbursement FEA Consting. Political Grassroots Candidate Name		egory/ ype		0 0		00.00			
	Senate President	ement For: Primary General Other (specify)			FEA CN GRASS	SLTING ROOTS	. Politic	CAL		
	State: District:					•	112	00.00		
	SUBTOTAL of Disbursements This Page (optional)					• •	113	JU.UC	·	
- [ ]	<b>FOTAL</b> This Period (last page this line number only)			. •						

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22 23 24 25 2 28a 28b 28c 29 X
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n		ed by any person	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Virginia Bronecke			Transaction ID: 01130.E24334 Date of Disbursement
Mailing Address 715 Clinton PI			10 M / D 28 / Y Y Y Y Y Y Y Y
City River Forest	State Zip Code IL 60305-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots Candidate Name		Catarany	1500.00
	rsement For:	Category/ Type	
Senate  State:  District:	Primary General Other (specify) ▼		FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Marlena Brooks			Transaction ID: 01130.E24326 Date of Disbursement
Mailing Address 8802 S. Emerald Ave.			10 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State Zip Code IL 60620-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots			1500.00
Candidate Name		Category/ Type	
Office Sought: House Disbution Senate President State: District:	rrsement For: Primary General Other (specify) ▼		FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Jonathan Callaway			Transaction ID: 01130.E24435 Date of Disbursement
Mailing Address 504 N Beach Ave			$\begin{bmatrix} 1 & 0 & M & 1 & 0 & 0 \\ 1 & 1 & 0 & M & 1 & 0 \end{bmatrix} \begin{bmatrix} 1 & 0 & 0 & 0 & 0 \\ 0 & 1 & 0 & 0 & 0 \end{bmatrix}$
City La Grange Park	State Zip Code IL 60526-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting: Political Grassroots Candidate Name		Category/ Type	1250.00
Office Sought: House Disbution Senate President State: District:	rsement For: Primary General Other (specify)	1	FEA CNSLTING: POLITICAL GRASSROOTS
State. District.			

TEMIZED DISBURSEMENTS    for each category of the	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	) FOR LINE (check onl	: NUMBER: v one)	PAGE 152 / 534
NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  Illinois Republican Party  Full Name (Last, First, Middle Initial) Jonathan Callaway  Mailing Address 504 N Beach Ave  City State Zip Code IL 60526- Purpose of Disbursement FEA Consting: Political Grassroots  Cardidate Name  Office Sought: House Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Jonathan Callaway  Mailing Address 504 N Beach Ave  City State Zip Code IL 60526- Purpose of Disbursement For: Senate Primary General Category/ Type  Office Sought: House Senate Primary General Category/ Type  City State: District:  Full Name (Last, First, Middle Initial) Jonathan Callaway  Office Sought: House Disbursement For: Senate Primary General Category/ Type  Office Sought: House Disbursement For: Senate President Senate President Category/ Type  Office Sought: House Disbursement For: Senate President District:  Full Name (Last, First, Middle Initial) Ross Cameron  Mailing Address 300 Massachusetts Ave NW Apt. 622  City Washington DC 20001- Purpose of Disbursement For: Senate President Category/ Type  Office Sought: House Senate President Disbursement Tor: Senate President Category/ Type  Office Sought: House Senate President Category/ Type  Office Sought: House President Presid		Detailed Summary Page	21b 27	22 23 28a 28b	28c 29 X
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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee    NAME OF COMMITTEE (in Full)	ZED DISBURSEMENTS		21b	22 23 24 25
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Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24359
Charles Cheesman			Date of Disbursement
Mailing Address 6929 157th P1.			10 M / 28 / Y 2010 Y
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Tinley Park	IL 60477-	<u> </u>	1200.00
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Robert Colby			Transaction ID: 01130.E24319 Date of Disbursement
Mailing Address 16207 Eagle Ridge Dr.			$\begin{bmatrix} \begin{smallmatrix} M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} \ \ \ \ \begin{bmatrix} \begin{smallmatrix} Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
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Full Name (Last, First, Middle Initial) Curt Conrad			Transaction ID: 01130.E24212 Date of Disbursement
Mailing Address 2704 Cronin Dr			$\begin{bmatrix} 1 & 0 & M & M & M & M & M & M & M & M & M$
City Springfield	State Zip Code IL 62711-7083		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Payroll			3360.04
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Mailing Address 18627 Oak Wood Ave			10 14 2010
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ITEMIZED DISBURSEMENTS	for each category of the	<u> </u>	(chec	k only b [	one) D 22		23	г	 □ 24	$\overline{}$	25	_	1 26
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Full Name (Last, First, Middle Initial) Mary Daniels							<b>ion ID</b> isburs		01130 nent	.E2	4481		
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SCHEDULE B (FEC Form 3X)	Use separate schedule	s)	FOR LINE				PAGE	159	/ 534
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Full Name (Last, First, Middle Initial)  T. Braxton Denton				Date o	action ID	seme	nt		
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Full Name (Last, First, Middle Initial)  T. Braxton Denton		Transaction ID: 01019.E24193 Date of Disbursement
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Full Name (Last, First, Middle Initial)  T. Braxton Denton		Transaction ID: 01130.E24489 Date of Disbursement
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City Springfield	State Zip Code IL 62703-5491	Amount of Each Disbursement this Perio
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Candidate Name	Category/ Type	
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Full Name (Last, First, Middle Initial) T. Braxton Denton		Transaction ID: 01130.E24541 Date of Disbursement
Mailing Address 2029 Carl Sandburg L	n. Apt 1	111 / 15 / 2010
City Springfield	State Zip Code IL 62703-5491	Amount of Each Disbursement this Perio
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		LINE NUMBER: PAGE 161 / 534			
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NAME OF COMMITTEE (In Full) Illinois Republican Party						
Full Name (Last, First, Middle Initial) Eric Di Silvestro			Date of Disburse			
Mailing Address 1510 N Bosworth Ave A	pt 1		10 1	<sup>D</sup> 4 2 0 1 0 Y		
City Chicago	State Zip Code IL 60642-7612		Amount of Each	Disbursement this Period		
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Full Name (Last, First, Middle Initial) Eric Di Silvestro			Date of Disburse			
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Full Name (Last, First, Middle Initial Nancy Dibelka	al)								<b>D:</b> 01 sement	130.E	24339	
Mailing Address 205 W. Min	er St.						<sup>M</sup> 0	M / [	28	Υ	ž 0 1 (	O Y
City Arlington Heights		State IL	Zip Code 60005-				Amou	nt of Ea	ch Disbu		-	
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John Dusik							Date o	of Disbu	rsement			
Mailing Address 320 23rd State #1403	treet S.						11		10	<u>L.</u>	ž 0 i (	0
City Arlington		State VA	Zip Code 22202-				Amou	nt of Ea	ch Disbu			
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Mailing Address 219 East Ta	aylor Run Pk	wy					1 <sup>M</sup> 0	M / [	18	Y	ž 0 i (	) Y
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East Meridian Strategies LLC					Date of	Disburse	ement		_
Mailing Address 219 East Taylor Run Pkv	vy				10	/ D2	27	žoj	0 <sup>Y</sup>
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<u> </u>	Full Name (Last, First, Middle Initial) East Meridian Strategies LLC				Transaction ID: 01130.E24311 Date of Disbursement
	Mailing Address 219 East Taylor Run Pk	xwy			10 M / D B / Y Y Y Y Y Y
	City Alexandria	State Zip Code VA 22314-			Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Volunteer Mail-Hultgren				7867.00
	Candidate Name			Category/ Type	
	Office Sought: House Disburs Senate President State: District:	sement For: Primary Gener Other (specify) ▼	al		FEA VOLUNTEER MAIL-HULTGR- EN
	Full Name (Last, First, Middle Initial) Anthony Esposito				Transaction ID: 01130.E24422 Date of Disbursement
	Mailing Address 1620 Hintz Ln Apt 2B Apt 2B				M M / D 1 4 / Y 2 0 1 0 Y
	City Wheeling	State Zip Code IL 60090-52	66		Amount of Each Disbursement this Perio
	Purpose of Disbursement FEA Cnslting: Political Grassroots				1750.00
	Candidate Name			Category/ Type	
	Office Sought: House Senate President State: District:	sement For: Primary Gener Other (specify) ▼	al		FEA CNSLTING: POLITICAL GRASSROOTS
	Full Name (Last, First, Middle Initial) Anthony Esposito				Transaction ID: 01130.E24484 Date of Disbursement
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	City Wheeling	State Zip Code IL 60090-52	66		Amount of Each Disbursement this Perio
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Illinois Republican Party							
Full Name (Last, First, Middle Initial) Anthony Esposito			Transaction ID: Date of Disburse	01130.E24536 ment			
Mailing Address 1620 Hintz Ln Apt 2B Apt 2B			111 / 1	5 2010			
City Wheeling	State         Zip Code           IL         60090-5266		Amount of Each	Disbursement this Period			
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots				4250.00			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		FEA CNSLTNG ROOTS	i: POLIT. GRASS-			
Full Name (Last, First, Middle Initial)  Jeanne Farha			Transaction ID: Date of Disburse	01130.E24512			
Mailing Address 2043 Vermont				D / Y Y Y Y			
City Quincy	State Zip Code IL 62301-		Amount of Each	Disbursement this Period			
Purpose of Disbursement FEA Communications Cnslt.	<u> </u>	•		500.00			
Candidate Name	C	Category/ Type					
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		FEA COMMUN	ICATIONS CNSLT.			
Full Name (Last, First, Middle Initial) Karla Farnsworth			Transaction ID: Date of Disburse	01130.E24523 ment			
Mailing Address 7701 Lafayette Forest D	ive #22		1 1 / D	1 2010			
City Annandale	State Zip Code VA 22003-		Amount of Each	Disbursement this Period			
Purpose of Disbursement FEA Travel Reimbursement		• •		338.80			
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President State: District:	ement For:    Primary		FEA TRAVEL F	REIMBURSEMENT			
SUBTOTAL of Disbursements This Page (optional)		<u></u>		5088.80			
TOTAL This Period (last page this line number only)							

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s	)   FOR LINE (check onl	NUMBER: PAGE 166 / 534
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c 29 X
Any Information copied from such Reports and Stator for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24369
Faulkner Strategies			Date of Disbursement
Mailing Address 12801 Sandy Court			
City Granger	State Zip Code IN 46530-		Amount of Each Disbursement this Period
Purpose of Disbursement	111 40000-		23825.67
FEA Volunteer Mail-Kinzinger			
Candidate Name		Category/ Type	
Office Sought: House Disbute Senate President State: District:	rsement For: Primary General Other (specify)		FEA VOLUNTEER MAIL-KINZIN- GER
Full Name (Last, First, Middle Initial)			- " - 0//00 50/070
Forms Design Plus			Transaction ID: 01130.E24373 Date of Disbursement
Mailing Address P.O. Box 9756			111 01 2010
City Peoria	State Zip Code IL 61612-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Volunteer Mail-Schilling			33416.13
Candidate Name		Category/ Type	
Office Sought:  House Senate President State:  Disbut	rsement For: Primary General Other (specify)		FEA VOLUNTEER MAIL-SCHILL- ING
Full Name (Last, First, Middle Initial) Kurt Fujio			Transaction ID: 01130.E24316 Date of Disbursement
Mailing Address 1810 W. Touhy			10
City Chicago	State Zip Code IL 60626-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots			1500.00
Candidate Name		Category/ Type	
Senate President	rsement For: Primary General Other (specify)		FEA CNSLTING. POLITICAL GRASSROOTS
State: District:			
	al)		58741.80

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	y Information copied from such Reports and Stater or commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)												
V	Illinois Republican Party												
	Full Name (Last, First, Middle Initial) Wanda Gates					Trans Date	of Di	sburs	emen				Y
	Mailing Address 1110 Hull Terrace Apt. 2					1 0		2	. 8 8		20	10	_
	City Evanston	State Zip Code IL 60202-				Amou	nt of	Each	Disb	ursen	nent th	nis Pe	riod
	Purpose of Disbursement FEA Cnslting. Political Grassroots Candidate Name			otogo	.m./	L.				•	1500	.00	-
				atego Type									
	Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify) ▼				FEA ( GRAS	CNS SSR	LTIN OOT	G. F S	OLIT	ΓICAI	-	
	Full Name (Last, First, Middle Initial) Robert Grassel					Trans	of Di	sburs	emen				
	Mailing Address 300 N. State St. Apt. 5205					1 <sup>M</sup> 0	M /	<sup>D</sup> 2	8 8	/ L	ž o	ť 0 `	
	City Chicago	State Zip Code IL 60654-				Amou	nt of	Each	Disb	ursen	nent th	nis Pe	riod
	Purpose of Disbursement FEA Cnslting. Political Grassroots										1500	.00	
	Candidate Name			atego Type	-								
	Office Sought:    House   Disburs	ement For:  Primary General  Other (specify) ▼				FEA ( GRAS	CNS SSR	LTIN OOT	G. P S	OLIT	ΓΙCΑΙ	=	
	Full Name (Last, First, Middle Initial) Andrew Griswold					Trans Date		sburs	emen				V.
	Mailing Address 536 W Fayette Ave					1 <sup>M</sup> 0	IVI /	<sup>D</sup> 1	<sup>D</sup> 4	′ _	20	1 0 \	
	City Springfield	State Zip Code IL 62704-2735	5			Amou	nt of	Each	Disb	ursen	nent th	nis Pe	erioc
	Purpose of Disbursement FEA Cnslting: Political Grassroots			0			_				1500	.00	_
	Candidate Name			atego Type									
	Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	1			FEA ( GRAS	CNS SSR	LTIN OOT	G: P S	OLIT	ΓΙCΑΙ	_	
	State. DISTITUT.												_

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		LINE NUMBER: PAGE 168 /				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 X 30b			
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NAME OF COMMITTEE (In Full)	to and address of any pointed out			Tom Scori Committee			
Illinois Republican Party							
Full Name (Last, First, Middle Initial) Andrew Griswold			Transaction IE Date of Disburs	D: 01130.E24492 sement			
Mailing Address 536 W Fayette Ave			10 M	28 2010			
City Springfield	State Zip Code IL 62704-2735		Amount of Eac	h Disbursement this Period			
Purpose of Disbursement FEA Cnslting: Political Grassroots		•		1600.00			
Candidate Name	C	Category/ Type					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		FEA CNSLTII GRASSROO	NG: POLITICAL TS			
Full Name (Last, First, Middle Initial) Andrew Griswold			Transaction II  Date of Disburs	D: 01130.E24544			
Mailing Address 536 W Fayette Ave							
City	State Zip Code		Amount of Eco	h Disbursement this Period			
Springfield	IL 62704-2735		Amount of Lac				
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots		• •		2500.00			
Candidate Name		Category/ Type					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		FEA CNSLTN ROOTS	IG: POLIT. GRASS-			
Full Name (Last, First, Middle Initial) The Guardian			Transaction II Date of Disburs	D: 01130.E24276 sement			
Mailing Address P.O. Box 8012			10 M	21 2010			
City Appleton	State         Zip Code           WI         54913-8012		Amount of Eac	h Disbursement this Period			
Purpose of Disbursement FEA Health Insurance				12374.16			
Candidate Name		Category/ Type					
Office Sought:  Senate President  State:  Disburs  Disburs	ement For: Primary General Other (specify)		FEA HEALTH	I INSURANCE			
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		16474.16			
TOTAL This Period (last page this line number only	)						

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CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check on	NUMBER: y one)	PAGE 169 / 534
	Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c 29 X 30b
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NAME OF COMMITTEE (In Full)				
Illinois Republican Party				
Full Name (Last, First, Middle Initial)			Transaction ID: (	
Eleana Hernandez			Date of Disburseme	
Mailing Address 3650 South Wood Street			10 / 28	Y ŽOTO
City Chicago	State Zip Code IL 60609-		Amount of Each Dis	sbursement this Period
Purpose of Disbursement	1L 00003			1400.00
FEA Costing. Political Grassroots				
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate	ement For: Primary General		FEA CNSLTING.	POLITICAL
President	Other (specify)		GRASSROOTS	
State: District:	·			
Full Name (Last, First, Middle Initial) Andria Hoffman			Transaction ID: (	
			Date of Disburseme	2 0 1 0
Mailing Address 5688 Rosos Pkwy			10 14	2010
City Long Grove	State Zip Code IL 60047-5063		Amount of Each Dis	sbursement this Period
Purpose of Disbursement	IL 00047-3003			2500.00
FEA Cnslting: Political Grassroots				
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate	ement For:		FEA CNSLTING: GRASSROOTS	POLITICAL
President	Primary General Other (specify)		GRASSROOTS	
State: District:				
Full Name (Last, First, Middle Initial) Andria Hoffman			Transaction ID: (	
Mailing Address 5688 Rosos Pkwy			10 28	<sup>'</sup> 2010 <sup>'</sup>
JOSO FLOSOS FRWY				
City Long Grove	State Zip Code IL 60047-5063		Amount of Each Dis	sbursement this Period
Purpose of Disbursement	00047 0000			2500.00
FEA Cnslting: Political Grassroots				
Candidate Name		Category/ Type		
	ement For:		FEA CNSLTING: GRASSROOTS	POLITICAL
Senate President	Primary General Other (specify) ▼		GRASSROOTS	
State: District:				
JBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		6400.00
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AN026			FFC Schedule P	( Form 3X) (Revised 02/

SCHEDOLE B (I LO I OIIII 3X)	Use separate schedule(s	(check on	= NUMBER: PAGE 1/0/534 lv one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c 29 X
Any Information copied from such Reports and Sta or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Andria Hoffman			Transaction ID: 01130.E24545 Date of Disbursement
Mailing Address 5688 Rosos Pkwy			111 D 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Long Grove	State Zip Code IL 60047-5063	3	Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots			4500.00
Candidate Name  Office Sought: House Disbu	rsement For:	Category/ Type	
Senate President State: District:	Primary General Other (specify)		FEA CNSLTNG: POLIT. GRASS-ROOTS
Full Name (Last, First, Middle Initial) Willie Howard			Transaction ID: 01130.E24352 Date of Disbursement
Mailing Address 7456 N. Rockwell St.			10 / 28 / 2010
City Chicago	State Zip Code IL 60645-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots			1500.00
Candidate Name		Category/ Type	
Office Sought: House Disbu	rsement For: Primary General Other (specify)		FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Internal Revenue Service			Transaction ID: 01130.E24225 Date of Disbursement
Mailing Address Department of Treasu	ry		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Cincinnati	State Zip Code OH 45999-0005	5	Amount of Each Disbursement this Peric
Purpose of Disbursement FEA Payroll Taxes Candidate Name		Category/	2586.68
Office Sought: House Disbu	rsement For: Primary General	Туре	FEA PAYROLL TAXES
President State: District:	Other (specify)		
			8586.68

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CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS		rate schedule(s)		heck on	<u> </u>	_		PAGE 17	
	Detailed S	Summary Page		21b 27	22 28a	23 28b	24 28	sc 29	X 30b
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NAME OF COMMITTEE (In Full)									
Illinois Republican Party									
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Internal Revenue Service					M	of Disburs		YYY	/ * Y
Mailing Address Department of Treasury					1 0		28	Ý ŽO	0
City Cincinnati	State OH	Zip Code 45999-0005			Amo	unt of Eac	h Disbur	sement thi	s Period
Purpose of Disbursement		+5555 0005	-	-				2586.	62
FEA Payroll Taxes									
Candidate Name			Cateo Typ	-					
Office Sought: House Disburse Senate	ement For: Primary	General			FEA	PAYROL	L TAX	ES	
President	Other (spec								
State: District:									
Full Name (Last, First, Middle Initial) Internal Revenue Service						saction ID	-	30.E2439	2
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Mailing Address Department of Treasury					11		1 5	20	0
City Cincinnati	State OH	Zip Code 45999-0005			Amoi	unt of Eacl	h Disbur	sement thi	s Period
Purpose of Disbursement	011	43999-0003						2586.	68
FEA Payroll Taxes									
Candidate Name			Cateo Typ	-					
· -	ement For:	Canaual			FEA	PAYROL	L TAX	ES	
Senate President	Primary Other (spec	General cify) ▼							
State: District:		, <b>,</b>							
Full Name (Last, First, Middle Initial) Jamestown Associates						saction ID of Disburs		30.E2437	'5
Mailing Address 5 Mapleton Road					1 1	M / D	0 1 /	<sup>Y</sup> <sup>Y</sup> <sup>Y</sup> 0 <sup>Y</sup>	í O Y
Suite 300									
City Princeton	State NJ	Zip Code 08540-			Amo	unt of Eac	h Disbur	sement thi	s Period
Purpose of Disbursement FEA Volunteer Mail-Dold			•		L.			1872.	50
Candidate Name			Categ	norv/					
			Тур						
Office Sought: House Disburse Senate	ement For: Primary	General			FEA	VOLUNT	EER M	AIL-DOL	.D
President	Other (spec								
State: District:									
JBTOTAL of Disbursements This Page (optional)				<u> </u>				7045.	B0
OTAL This Period (last page this line number only)				•					
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30	CHEDULE E	3 (FEC Form 3	3 <b>X</b> )	Use sepa	arate schedule(s)				NUMBE	ER:			PA	GE	172 /	534
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L-	•	poses, other than using	g the name	and addres	ss of any political	com	nmitt	ee to so	olicit cont	rıbut	ions fr	om si	uch c	omm	ittee	
	NAME OF COMM Illinois Republi	` ,														
<b>,</b>	Full Name (Last, Robert V. John	First, Middle Initial) son II							_	of D	on ID	emen		.E24	1444	
	Mailing Address	1733 Sequoia T	rl						1 <sup>M</sup> 0	М	/ D.	1 4	/ Y	ž	οťο	) <sup>Y</sup>
	City Glenview			tate L	Zip Code 60025-2022				Amo	unt o	f Each	n Disb	urse	-		Period
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	Candidate Name						ateg Type	-								
	Office Sought:	House Senate President		nent For: Primary Other (spe	General cify) ▼				FEA GRA	CNS SSF	SLTIN	IG: F S	POLI	TIC	AL	
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	Robert V. John	First, Middle Initial) Ison II							Date	of D	on ID	emen				
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	City Glenview			tate L	Zip Code 60025-2022				Amo	unt o	f Each	n Disb	urse			
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	Robert V. John										on ID isburs	emen		* V		Y
	Mailing Address	1733 Sequoia T	rl						1 1		L	15	L	2	οίο	)
	City Glenview			tate L	Zip Code 60025-2022				Amo	unt o	f Each	n Disb	urse	-	this F 08.35	
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NAME OF COMMITTEE (In Full) Illinois Republican Party					
 Full Name (Last, First, Middle Initial)					Transaction ID: 01130.E24562
Greta Joynes					Date of Disbursement
Mailing Address 3745 Gunston Rd.					M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code				Amount of Each Disbursement this Per
Alexandria Purpose of Disbursement	VA 22302-				780.44
FEA Food & Beverage Reimbursement					
Candidate Name			ateg Typ	gory/ pe	
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)	•			FEA FOOD & BEVERAGE REIME URSEMENT
Full Name (Last, First, Middle Initial)					T
Greta Joynes					Transaction ID: 01130.E24563 Date of Disbursement
Mailing Address 3745 Gunston Rd.					
City Alexandria	State Zip Code VA 22302-				Amount of Each Disbursement this Per
Purpose of Disbursement FEA Travel Reimbursement					1942.62
Candidate Name			ateg Typ	gory/ be	
Office Sought: House Senate President State: District:	ement For:  Primary General  Other (specify) ▼	1			FEA TRAVEL REIMBURSEMENT
Full Name (Last, First, Middle Initial)  K.K. Stevens Publishing Company					Transaction ID: 01130.E24285 Date of Disbursement
Mailing Address 100 N. Pearl St. P.O. Box 590					M M / D 2 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Astoria	State Zip Code IL 61501-0590	)			Amount of Each Disbursement this Per
Purpose of Disbursement FEA Volunteer Mail-Schilling	2.22. 3000				13900.00
Candidate Name			ateg Typ	gory/ pe	
Senate President	ement For:  Primary General Other (specify) ▼	1			FEA VOLUNTEER MAIL-SCHILL- ING
 State: District:					16623.06

or for commercial purposes, or NAME OF COMMITTEE Illinois Republican Part Full Name (Last, First, Mid John Kalmbach  Mailing Address 746 Apt.  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Ho See Prescript State: District Full Name (Last, First, Mid Robert Kandelman  Mailing Address 3108  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Ho City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name	uch Reports and State ther than using the nare In Full)  W. Bittersweet Place 1W  assroots  Disburate esident t:  Idle Initial)  W. Jerome St.	Detailed ements may n me and addre	Zip Code 60613-	21b 27 d by any perso	28a 28b 28c 29 on for the purpose of soliciting contributions of solicit contributions from such committee  Transaction ID: 01130.E24337 Date of Disbursement  Amount of Each Disbursement this F  1500.00  FEA CNSLTING. POLITICAL GRASSROOTS  Transaction ID: 01130.E24354 Date of Disbursement  M M M / D B D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
or for commercial purposes, or NAME OF COMMITTEE Illinois Republican Par Full Name (Last, First, Mid John Kalmbach  Mailing Address 746 Apt.  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Ho  See Prescript State: District Full Name (Last, First, Mid Robert Kandelman Mailing Address 3108  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Ho  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Ho  See Prescript States States See Prescript See See See See See See See See See Se	ther than using the naruln Full) ty  Idle Initial)  W. Bittersweet Place 1W  assroots  Disburate esident t: Idle Initial)  W. Jerome St.	ce State IL Sement For: Primary Other (spe	Zip Code 60613-  General ecify)   Zip Code	Category/	Transaction ID: 01130.E24337 Date of Disbursement  Mo M / D2 B / Y 2 0 1 C  Amount of Each Disbursement this F  1500.00  FEA CNSLTING. POLITICAL GRASSROOTS  Transaction ID: 01130.E24354 Date of Disbursement  Mo M / D2 B / Y 2 0 1 C
NAME OF COMMITTEE Illinois Republican Par  Full Name (Last, First, Mic John Kalmbach  Mailing Address 746 Apt.  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Ho Se Pre State: District  Full Name (Last, First, Mic Robert Kandelman  Mailing Address 3108  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Ho Scandidate Name  Office Sought: Ho Se Pre	In Full) ity  Idle Initial)  W. Bittersweet Place  1W  assroots  Disburstersident  t:  Idle Initial)  B. W. Jerome St.	State IL  Sement For: Primary Other (spe	Zip Code 60613- General ecify) ▼	Category/	Transaction ID: 01130.E24337 Date of Disbursement  M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Mic John Kalmbach  Mailing Address 746 Apt. City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Full Name (Last, First, Mic Robert Kandelman  Mailing Address 3108  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought: Full Name (Last, First, Mic Robert Kandelman  Mailing Address 3108  City Chicago Purpose of Disbursement FEA Cnslting. Political Grace Candidate Name  Office Sought:  Ho Se Pre	ddle Initial)  W. Bittersweet Place 1W  assroots  Disbura hate esident t: Idle Initial)  B. W. Jerome St.	State IL  Sement For: Primary Other (spe	General ecify) ▼		Date of Disbursement  M M M / D 2 B / Y 2 0 1 C  Amount of Each Disbursement this F  1500.00  FEA CNSLTING. POLITICAL GRASSROOTS  Transaction ID: 01130.E24354 Date of Disbursement  M M M / D 2 B / Y 2 0 1 C
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John Kalmbach  Mailing Address 746 Apt.  City Chicago Purpose of Disbursement FEA Cnslting. Political Gra Candidate Name  Office Sought: Ho Se Pre State: District  Full Name (Last, First, Mic Robert Kandelman  Mailing Address 3108  City Chicago Purpose of Disbursement FEA Cnslting. Political Gra Candidate Name  Office Sought: Ho Se Pre	W. Bittersweet Place 1W  assroots  Disburs nate esident t: Idle Initial)  B.W. Jerome St.	State IL  Sement For: Primary Other (spe	General ecify) ▼		Date of Disbursement  M M M / D 2 B / Y 2 0 1 C  Amount of Each Disbursement this F  1500.00  FEA CNSLTING. POLITICAL GRASSROOTS  Transaction ID: 01130.E24354 Date of Disbursement  M M M / D 2 B / Y 2 0 1 C
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Merle Kaplan	aic iiiliai)				Transaction ID: 01130.E24347 Date of Disbursement
Mailing Address 345 #606	W. Fullerton Pkwy				10 M / 28 / Y Y Y O Y O
City Chicago		State IL	Zip Code 60614-		Amount of Each Disbursement this F
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Full Name (Last, First, Middle Initial) Jerry King			Transaction ID: 01130.E24445 Date of Disbursement
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Jerry King			Transaction ID: 01130.E24497 Date of Disbursement
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NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Anne Kirkpatrick			Transaction ID: 01130.E24332 Date of Disbursement
Mailing Address 222 E. Chestnut St. Unit 8B			
City Chicago	State Zip Code IL 60611-		Amount of Each Disbursement this Period
Purpose of Disbursement FEA Cnslting. Political Grassroots Candidate Name		Catanami	1500.00
	ursement For:	Category/ Type	_
Senate President State: District:	Primary General Other (specify) ▼		FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Kyle Kizzier			Transaction ID: 01130.E24526 Date of Disbursement
Mailing Address 1422 East Capitol St.	, NE		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Food & Beverage Reimbursement			645.66
Candidate Name		Category/ Type	_
Office Sought: House Disb Senate President State: District:	ursement For: Primary General Other (specify) ▼		FEA FOOD & BEVERAGE REIMB- URSEMENT
Full Name (Last, First, Middle Initial) Larkin Brody & Associates			Transaction ID: 01130.E24227 Date of Disbursement
Mailing Address 5517 MacArthur Blvd			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Washington	State Zip Code DC 20016-	_	Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Volunteer Mail-Schilling Candidate Name		Category/	92827.00
Office Sought: House Disb	ursement For:	Туре	FEA VOLUNTEER MAIL-SCHILL-ING
Senate President State: District:	Primary General Other (specify) ▼		

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	Mailing Address 1210 Halfday Rd.					1 <sup>M</sup> 0	IVI /	2	7 /	2	0 i 0	)
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	Mailing Address 1420 North Lakeshore D	rive				1 <sup>M</sup> 0	M /	<sup>D</sup> 28	3 /	Ý Ž	0 1 C	) <sup>Y</sup>
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	Full Name (Last, First, Middle Initial) Margaret Lindsay							burser		0.E2	4346	
	Mailing Address 1420 N. Lake Shore Driv	⁄e				1 <sup>M</sup> 0	M /	28	3 /	ž	0 ť 0	) <sup>Y</sup>
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	Full Name (Last, First, Middle Initial) David Marszalik					Date		on ID:	ement				
	Mailing Address 9541 S. 89th Ave.					1 <sup>M</sup> 0	, ivi	2	8 <sup>D</sup>	Ľ	20	ío`	
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	Full Name (Last, First, Middle Initial) Joshua Marszalik					1		on ID:		130.E	243	22	
	Mailing Address 5556 S. Keeler					1 <sup>M</sup> 0	M /	<sup>D</sup> 2	8 /	Y	ž 0	ť 0 `	Y
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	Mailing Address 9541 S. 89th Ave.					1 <sup>M</sup> 0	M /	<sup>D</sup> 2	8	Ľ	ž o	í 0 `	
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١.	NAME OF COMMITTEE (In Full) Illinois Republican Party										
	Full Name (Last, First, Middle Initial) John McGuire				Date of Disbur						
	Mailing Address 4145 N Springfield Av	e			10 /	28 2010					
	City Chicago	State Zip C	ode 18-1811		Amount of Eac	ch Disbursement this Period					
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	Full Name (Last, First, Middle Initial) Frank Medina				Transaction II Date of Disbur	<b>D:</b> 01130.E24321					
	Mailing Address 3650 South Wood Str	eet			10 /	28 2010					
	City Chicago	State Zip C			Amount of Eac	ch Disbursement this Period					
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	Full Name (Last, First, Middle Initial) Tonia Members				Transaction II Date of Disbur	<b>D:</b> 01130.E24325 sement					
	Mailing Address 7736 S. May St.				10 /	28 2010					
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Illinois Republican Party						
Full Name (Last, First, Middle Initial) Jackie Menconi			Transaction Date of Disb		).E24343	
Mailing Address 908 N Lincoln Ave			10 M	<sup>D</sup> 2 8 /	žo i	O Y
,	State Zip Code IL 60068-2023		Amount of Ea	ach Disburse		
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Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify)		FEA CNSLT GRASSROO	TING. POL OTS	ITICAL	
Full Name (Last, First, Middle Initial) Cheryl Meyer			Transaction Date of Disb		).E24448	
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Mailing Address 5406 Crossview Lane			10		201	<u></u>
,	State Zip Code IL 60156-		Amount of Ea	ach Disburse	ement this	Period
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	Full Name (Last, F Cheryl Meyer	First, Middle Initial)							saction of Dis		0110	30.E2	4551	
	Mailing Address	5406 Crossviev	v Lane					1 1	M /	<sup>D</sup> 1	5 /	Y	2 0 1 (	o <sup>Y</sup>
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	Office Sought:	House Senate President	Disburse	ment For: Primary Other (spe	General			FEA GRA	CNS SSR	LTING	G: PO	LITIC	CAL	
	State:	District:												

		3 (FEC Form	-	Use sepa	arate schedule(s)	(check o		INE NUMBER: PAGE 183 / 534 conly one) b 22 23 24 25 2		/ 534	ļ			
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		ed from such Report poses, other than us												
`	NAME OF COMM Ilinois Republi	` '												
	Full Name (Last, I Devin Meyer	First, Middle Initial)						Date	action ID	ement				
N	Mailing Address	1 W Superior # 3011	St Apt 301	1				1 1	M / D.	15	Y	ž 0 Ť	0 <sup>Y</sup>	
	City Chicago			State IL	Zip Code 60654-8841			Amou	nt of Each	n Disbu	rseme	ent this	Perio	nd
F	Purpose of Disbu EA Cnsltng: Pol Candidate Name							<u> L.</u>			1	292.0	0	_
_	Januluale Name						tegory/ Γype							
	Office Sought: State:	House Senate President District:	Disburse	ement For: Primary Other (spe	General ecify) ▼			FEA (	CNSLTN TS	G: PO	LIT.	GRAS	SS-	
F		First, Middle Initial)							action ID	-	30.E	24335	5	
N	Mailing Address	5441 N. Sawy	er					1 <sup>M</sup> 0	M / D	28 <sup>D</sup>	Y	ž 0 Ť	0 <sup>Y</sup>	
	City Chicago			State IL	Zip Code 60625-			Amou	nt of Each	n Disbu	rseme	ent this	Perio	d
F	Purpose of Disbu FEA CnsIting. Po			IL .	00023-	Г	]				1	500.0	0	
Ċ	Candidate Name						tegory/ Type							
	Office Sought:	House Senate President District:	Disburse	ement For: Primary Other (spe	General cify) ▼		. , , , ,	FEA ( GRAS	CNSLTIN SSROOT	IG. PC S	OLITI	CAL		
	Full Name (Last, Luke Neuser	First, Middle Initial)							action ID		30.E	24449	)	
N	Mailing Address	4333 S. 24th S	St.					1 <sup>M</sup> 0	M / D.	1 <b>4</b>	Y	ž 0 1	0 <sup>Y</sup>	
	City Quincy			State IL	Zip Code 62305-			Amou	nt of Each	n Disbu	rseme	ent this	Perio	bd
F	Purpose of Disbu FEA CnsIting: Po				02000							750.0	0	
(	Candidate Name						itegory/ Γype							
	Office Sought:	House Senate President District:	Disburse	ement For: Primary Other (spe	General ccify) ▼			FEA ( GRAS	CNSLTIN SSROOT	IG: PC S	DLITI	CAL		
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		Ë	21b 27	22 28a		23 28b		24 28c	Н	25 29	X
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na												5
NAME OF COMMITTEE (In Full)												
Illinois Republican Party												
Full Name (Last, First, Middle Initial) Luke Neuser							ion ID	-		).E2	4500	
							isburs	2 8	/ [7	Ý	0 Ĭ 0	Y
City Quincy	State Zip Code IL 62305-				Amou	unt c	t Eacl	n Dis	burse	-	t this F	
Purpose of Disbursement FEA CnsIting: Political Grassroots					<u> </u>			0		7	50.00	)
Candidate Name			ate Typ	gory/ pe								
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)				FEA GRA	CN: SSF	SLTIN ROOT	IG: S	POL	ITIC	AL	
Full Name (Last, First, Middle Initial) Luke Neuser							ion ID			).E2	4552	
Mailing Address 4333 S. 24th St.					1 1	М	/ D	1 5	/	ž	0 1 C	) <sup>Y</sup>
City Quincy	State Zip Code IL 62305-				Amou	unt c	f Eacl	n Dis	burse	men	t this F	Perio
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots					<u>L.</u>					7	50.00	)
Candidate Name			ate Tyr	gory/ pe								
Senate President	rsement For: Primary General Other (specify)		<u> </u>	<u>'</u>	FEA ROO	CN: TS	SLTN	G: F	POLI	T. G	RAS	S-
State: District: Full Name (Last, First, Middle Initial)					Trans	sact	ion ID	): O	1130	F2	4345	
Karen Parr							isburs	-				V
Mailing Address 141 N. Cedar Street					1 0			2 8	Ĺ	2	0 1 C	)
City Palatine	State Zip Code IL 60067-				Amou	unt c	f Eacl	n Dis	burse	men	t this F	Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots					L.					15	00.00	)
Candidate Name			ate Typ	gory/ pe								
Senate President	rsement For: Primary General Other (specify)	-			FEA GRA	CN: SSF	SLTIN ROOT	IG. S	POL	ITIC	AL	
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SCILLOCLE B (I LC I OIIII 3X)	Use separate schedule	(S) (check or	E NUMBER: PAGE 185 / 534
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag	' lè	22 23 24 25 2 28a 28b 28c 29 X
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Nancy Perlman			Transaction ID: 01130.E24351 Date of Disbursement
Mailing Address 3847 N Whipple St			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Chicago	State Zip Code IL 60618-352	21	Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots			1400.00
Candidate Name		Category/ Type	
Office Sought: House Disbuter Senate President State: District:	ursement For: Primary General Other (specify) ▼	al	FEA CNSLTING. POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Adam Peterman			Transaction ID: 01130.E24525 Date of Disbursement
Mailing Address 440 12th Street, NE #	1		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Washington	State Zip Code DC 20002-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Meal & Beverage Reimbursement			1731.48
Candidate Name		Category/ Type	
Office Sought: House Disbution Senate President State: District:	ursement For: Primary General Other (specify) ▼	al	FEA MEAL & BEVERAGE REIMB- URSEMENT
Full Name (Last, First, Middle Initial) Adam Peterman			Transaction ID: 01130.E24524 Date of Disbursement
Mailing Address 440 12th Street, NE #	1		
City Washington	State Zip Code DC 20002-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Travel Reimbursement			2037.95
Candidate Name	reamont For:	Category/ Type	_
Office Sought: House Disbu Senate President	ursement For: Primary Genera Other (specify) ▼	al	FEA TRAVEL REIMBURSEMENT
State: District:			

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)		LINE NUMBER: PAGE 186 / 534 only one)
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21 27	b 22 23 24 25 2 28a 28b 28c 29 X 3
	y Information copied from such Reports and Stat for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
	Full Name (Last, First, Middle Initial) Diane Peterson			Transaction ID: 01130.E24341 Date of Disbursement
	Mailing Address 9243 Latrobe			10 M / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Skokie	State Zip Code IL 60077-		Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Cnslting. Political Grassroots			700.00
	Candidate Name		Category/ Type	
	Senate President	sement For: Primary General Other (specify)		FEA CNSLTING. POLITICAL GRASSROOTS
_	State: District:  Full Name (Last, First, Middle Initial)  Don Peterson			Transaction ID: 01130.E24342 Date of Disbursement
	Mailing Address 9243 Latrobe			10 M / D 28 / Y 2010
	City Skokie	State Zip Code IL 60077-		Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Cnslting. Political Grassroots		• •	700.00
	Candidate Name		Category/ Type	
	Office Sought: House Senate President State: District:	sement For: Primary General Other (specify)		FEA CNSLTING. POLITICAL GRASSROOTS
	Full Name (Last, First, Middle Initial) Randy Pollard			Transaction ID: 01130.E24450 Date of Disbursement
	Mailing Address 2517 Mabry Ln			M M / D D A Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Vandalia	State Zip Code IL 62471-3710		Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Cnslting: Political Grassroots Candidate Name		Category/	2750.00
	Senate President	sement For: Primary General Other (specify)	Туре	FEA CNSLTING: POLITICAL GRASSROOTS
Г	State: District:			4150.00

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	(check onl	NUMBER: PAGE 187/534
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c 29 X
Any Information copied from such Reports and Stator for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)  Illinois Republican Party	and and address of any pointed		
Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24501
Randy Pollard			Date of Disbursement
Mailing Address 2517 Mabry Ln			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code		Amount of Each Disbursement this Period
Vandalia	IL 62471-3710		2750.00
Purpose of Disbursement FEA CnsIting: Political Grassroots			
Candidate Name		Category/ Type	
Office Sought: House Disbute Senate President State: District:	rsement For: Primary General Other (specify)		FEA CNSLTING: POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial)			- " - 04400 504550
Randy Pollard			Transaction ID: 01130.E24553 Date of Disbursement
Mailing Address 2517 Mabry Ln			1 1 1 5 7 2 0 1 0 Y
City Vandalia	State Zip Code IL 62471-3710		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots			7750.00
Candidate Name		Category/ Type	
Office Sought: House Disbute Senate President State: District:	rsement For: Primary General Other (specify)		FEA CNSLTNG: POLIT. GRASS-ROOTS
Full Name (Last, First, Middle Initial) Andrew Proctor			Transaction ID: 01130.E24451 Date of Disbursement
Mailing Address 1203 Wesley Avenue #109			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Savoy	State Zip Code IL 61874-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting: Political Grassroots			1500.00
Candidate Name		Category/ Type	
Senate President	rsement For: Primary General Other (specify)		FEA CNSLTING: POLITICAL GRASSROOTS
State: District:			
	d)		12000.00

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		Detailed S	Summary Page		21b 27	28a	28b	28	Sc 🗌	29	Х	20 30
ny Information copied from s r for commercial purposes, c											3	
NAME OF COMMITTEE Illinois Republican Pa	` ,											
Full Name (Last, First, Mic Andrew Proctor	ddle Initial)						action ID f Disburs		30.E24	1505		
Mailing Address 1203 #109	3 Wesley Avenue	)				10	/ D	28 <sup>D</sup>	Y Y	0 i 0	) <sup>Y</sup>	
City Savoy		State IL	Zip Code 61874-			Amour	nt of Each	Disbur	sement	this F	Period	t
Purpose of Disbursement FEA Cnslting: Political Gr Candidate Name	assroots					<u> L.</u>			160	00.00	)	_
Candidate Name					egory/ ype							
Se	nate esident	oursement For: Primary Other (spe	General ccify) ▼			FEA C GRAS	NSLTIN SROOT	IG: PO S	LITIC	٩L		
Full Name (Last, First, Min Andrew Proctor							action ID f Disburs	-	30.E2	1554		_
Mailing Address 1203	3 Wesley Avenue	)				1 1 1	/ D	<b>5</b> /	y y 2	0 Ĭ 0	) Y	
City Savoy		State IL	Zip Code 61874-			Amour	nt of Each	Disbur	sement	this F	Period	t
Purpose of Disbursement FEA Cnsltng: Polit. Grass	roots	<u> </u>	01074-						300	0.00	)	_
Candidate Name					egory/ ype							
Se	nate esident	oursement For: Primary Other (spe	General cify) ▼	<u> </u>	<del>Jpc</del>	FEA C ROOT	NSLTN S	G: POI	LIT. G	RASS	S-	
Full Name (Last, First, Mic Michael Quinlan							action ID f Disburs		30.E24	1318		
Mailing Address 226	9 W. 109th St.					1 0 N	/ D2	28	y y 2	0 Ĭ 0	) Y	
City Chicago		State IL	Zip Code 60643-			Amour	nt of Each	Disbur	sement	this F	Period	t
Purpose of Disbursement FEA Cnslting. Political Gr	assroots	IL.	00040						150	00.00	)	
Candidate Name					tegory/ Type							
Se	nate esident	oursement For: Primary Other (spe	General cify) ▼		<u> </u>	FEA C GRAS	NSLTIN SROOT	IG. PO S	LITIC	ΑL		
SUBTOTAL of Disbursement		nal)			•		• •		610	0.00		_
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CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	NUMBER: PAGE 189 / 534 / one)
	Detailed Summary Page	21b 27	22 23 24 25 26 26 29 X 30b
y Information copied from such Reports and Statem for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24452
Michael Rasmussen			Date of Disbursement
Mailing Address 319 Bonnie Brae Lane			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
	State Zip Code IL 61530-		Amount of Each Disbursement this Period
Purpose of Disbursement		• •	750.00
FEA Consisting: Political Grassroots  Candidate Name		Catagory	
Calididate Name		Category/ Type	
Office Sought: House Disburse Senate	ement For:  Primary General		FEA CNSLTING: POLITICAL
President	Other (specify)		GRASSROOTS
State: District:			
Full Name (Last, First, Middle Initial) Michael Rasmussen			Transaction ID: 01130.E24506 Date of Disbursement
			M M / D D / Y Y Y
Mailing Address 319 Bonnie Brae Lane			10 28 2010
,	State Zip Code IL 61530-		Amount of Each Disbursement this Period
Purpose of Disbursement	01330-		750.00
FEA Constitute Newscatter Grassroots			
Candidate Name		Category/ Type	
	ement For:		FEA CNSLTING: POLITICAL GRASSROOTS
Senate President	Primary General Other (specify)		GRASSROOTS
State: District:	• a. (• p. • e. )   •		
Full Name (Last, First, Middle Initial) Michael Rasmussen			Transaction ID: 01130.E24555
			Date of Disbursement
Mailing Address 319 Bonnie Brae Lane			111 / 15 / Y Y Y Y Y Y
	State Zip Code		Amount of Each Disbursement this Period
Eureka Purpose of Disbursement	IL 61530-		1250.00
FEA Cnsltng: Polt. Grassroots			
Candidate Name		Category/ Type	
	ement For:		FEA CNSLTNG: POLT. GRASSR-
Senate   President	Primary General Other (specify) ▼		OOTS
State: District:	Carol (opcoliy)		
UBTOTAL of Disbursements This Page (optional)		<u>Þ</u>	2750.00
OTAL This Period (last page this line number only)			
AN026		<b>P</b>	FEC Schedule B ( Form 3X) (Revised 02

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	s)		OR LINE heck only		:H:		Į	PAGI	190	/ 534
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a		23 28b	2	24 28c	25 29	X
	y Information copied from such Reports and Stat or commercial purposes, other than using the na											
\	NAME OF COMMITTEE (In Full)	arie and address of arry pointe	ai con		10 30	iicit conti	ibutio	) II S III	Jili Su	CIT COIT	millee	
$\rangle$	Illinois Republican Party											
	Full Name (Last, First, Middle Initial)										24519	)
	Matthew Rentschler						of Dis	sburse	ement		V V	V
	Mailing Address 903 Newcastle #6					1 1	,	1	<b>0</b> /	Ľ.	ž 0 Ť	0 '
	City	State Zip Code				Amou	ınt of	Each	Disbu	ırseme	nt this	Perio
	Champaign Purpose of Disbursement	IL 61822-	1_							3	000.0	0
	FEA Communications Cnslt.						-	-				-
	Candidate Name		C	ateo Typ	gory/ pe							
	Senate President	rsement For: Primary General Other (specify)				FEA (	COM	1MUN	NICA <sup>-</sup>	TIONS	S CNS	SLT.
	State: District: Full Name (Last, First, Middle Initial)											
	Craig Roberts					Date	of Dis	sburse	ement		24570	
	Mailing Address 916 G Street NW #505	5				1 1	M /	<sup>D</sup> 1	<sup>D</sup> 2	Y	ž 0 Ť	0 Y
	City Washington	State Zip Code DC 20004-				Amou	int of	Each	Disbu	ırseme	nt this	Perio
	Purpose of Disbursement FEA Food & Beverages Reimbursement		Г	v		L.					873.3	7
	Candidate Name		C	ateç Typ	gory/ pe							
	Office Sought: House Disbut Senate President State: District:	rsement For: Primary General Other (specify)	·			FEA I BURS	FOO SEM	D & ENT	BEVE	ERAG	ES RI	EIM-
	Full Name (Last, First, Middle Initial) Craig Roberts								01		24571	
	Mailing Address 916 G Street NW #505	j				1 1			<sup>D</sup> 2		ž o ĭ	0 <sup>Y</sup>
	City Washington	State Zip Code DC 20004-				Amou	ınt of	Each	Disbu	ırseme	nt this	Perio
	Purpose of Disbursement FEA Travel Reimbursement	2000.	Г	v		L.					638.3	5
	Candidate Name		c	ateg Typ	gory/							
	Senate President	rsement For: Primary General Other (specify)	1	- , ,		FEA <sup>-</sup>	ΓRA	VEL	REIM	1BUR	SEME	NT
_	State: District:  JBTOTAL of Disbursements This Page (optional)						-	•			511.7	•

ITELLIBED DIABUTATION	Use separate schedule(s	(check on	= NUMBER: PAGE 191 / 534 lv one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22 23 24 25 2 28a 28b 28c 29 X
Any Information copied from such Reports and Stator for commercial purposes, other than using the n			
NAME OF COMMITTEE (In Full) Illinois Republican Party			
Full Name (Last, First, Middle Initial) Donn Salvosa			Transaction ID: 01130.E24513 Date of Disbursement
Mailing Address 9911 Oak Branch Driv	/e		111
City Vienna	State Zip Code VA 22181-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Travel Reimbursement	22.10.		213.40
Candidate Name		Category/ Type	
Office Sought: House Disbuter Senate President State: District:	ursement For:  Primary General  Other (specify) ▼		FEA TRAVEL REIMBURSEMENT
Full Name (Last, First, Middle Initial)			<b>Transaction ID:</b> 01130.E24566
Christopher Sarley  Mailing Address 115 C Street, SE			Date of Disbursement  1 1 1 2 2 0 1 0
	Otata 7'- Oada		
City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Supplies: Paper & Labels			86.54
Candidate Name		Category/ Type	
Office Sought: House Disbuter Senate President State: District:	orsement For:  Primary General  Other (specify) ▼		FEA SUPPLIES: PAPER & LAB- ELS
Full Name (Last, First, Middle Initial) Christopher Sarley			Transaction ID: 01130.E24565 Date of Disbursement
Mailing Address 115 C Street, SE			111 D 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Travel Reimbursement			2120.59
Candidate Name		Category/ Type	
Senate President	ursement For: Primary General Other (specify) ▼		FEA TRAVEL REIMBURSEMENT
State: District:			

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NE NUMBER: PAGE 192/5			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	one) 22 23 28a 28b	24 25 26 28c 29 X 30b		
Any Information copied from such Reports and States		any person fo	or the purpose of so	pliciting contributions		
or for commercial purposes, other than using the nan	ne and address of any political cor	mmittee to sol	icit contributions fro	om such committee		
NAME OF COMMITTEE (In Full)						
/ Illinois Republican Party						
Full Name (Last, First, Middle Initial) Christopher Sarley			Transaction ID: Date of Disburse	01130.E24564 ement		
Mailing Address 115 C Street, SE			1 1 1 D	2 2010		
City Washington	State Zip Code DC 20003-		Amount of Each	Disbursement this Period		
Purpose of Disbursement FEA Food & Beverage Reimbursement	Γ			166.93		
Candidate Name	C	Category/ Type				
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		FEA FOOD & E URSEMENT	BEVERAGE REIMB-		
Full Name (Last, First, Middle Initial)			Transaction ID:	01130.E24357		
Peter Schellenbach			Date of Disburse			
Mailing Address 634 Drexel			10 2	8 7 2010		
City Glencoe	State Zip Code IL 60022-		Amount of Each	Disbursement this Period		
Purpose of Disbursement FEA Cnslting. Political Grassroots				1700.00		
Candidate Name		Category/ Type				
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify) ▼		FEA CNSLTING GRASSROOTS	G. POLITICAL S		
Full Name (Last, First, Middle Initial)			Transaction ID:	01130.E24217		
Tyler Sidell			Date of Disburse	ement		
Mailing Address 109 Kay Ct			1 0 1	4 2010		
City East Peoria	State         Zip Code           IL         61611-4511		Amount of Each	Disbursement this Period		
Purpose of Disbursement FEA Payroll				1375.00		
Candidate Name		Category/ Type				
Office Sought:  Senate President  State:  Disburs  Disburs	ement For: Primary General Other (specify)		FEA PAYROLL	-		
SUBTOTAL of Disbursements This Page (optional)		▶		3241.93		
TOTAL This Period (last page this line number only	·)					
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IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	$\boldsymbol{\sqcup}$	23 28b	ш.	24 28c	25 29	X 3
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)											
	Illinois Republican Party											
•	Full Name (Last, First, Middle Initial) Tyler Sidell					Date	of Dis	sburse	emen		E24299	
	Mailing Address 109 Kay Ct					1 <sup>M</sup> 0	M /	<sup>D</sup> 2	8		žoť	0 1
	City East Peoria	State Zip Code IL 61611-451	ı			Amou	int of	Each	Disb		ent this	
	Purpose of Disbursement FEA Payroll Candidate Name		Ca	atego	ory/						1475.0	iU
	Office Sought:    House   Disburs	ement For: Primary General Other (specify)		Туре	9	FEA I	PAY	ROLI	_			
	Full Name (Last, First, Middle Initial) Tyler Sidell					Date		sburse			2438 2 0 1	
	Mailing Address 109 Kay Ct											
	City East Peoria	State Zip Code IL 61611-451	l 1			Amou	int of	Each	Disb		ent this 1375.0	
	Purpose of Disbursement FEA Payroll Candidate Name			atego Type	-			•		•		
	Office Sought:    House   Disburs     Senate   President     State: District:	ement For:  Primary General  Other (specify) ▼				FEA I	PAY	ROLI	_			
	Full Name (Last, First, Middle Initial) Smartech Corp.					Date	of Dis	sburse	emen		E2423	
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NAME OF COMMITTEE (In Full)  Name (Last, First, Middle Initial)  James Sprakties  Mailing Address 12228 Black Road  City State Zip Code IL 61270-  Purpose of Disbursement  FEA Cnsting: Polit. Grassroots  Candidate Name  Office Sought: House Spring St., P.O. Box 4187  City State Board of Elections 1020 S. Spring St., P.O. Box 4187  City State Springfield IL 62708-  Purpose of Disbursement FEA: Statewide Voter File Candidate Name  Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify) ▼  Transaction ID: 01130.E24238 Date of Disbursement This Peric Category/ Type  FEA: STATEWIDE VOTER FILE  FEA: CNSLTING: POLITICAL GRASS-  Transaction ID: 01130.E24350 Date of Disbursement This Peric Category/ Type  FEA: STATEWIDE VOTER FILE  FEA: CNSLTING: POLITICAL  GRASSROOTS  Condidate Name  Office Sought: House President  Office Soug		Detailed Summary Page	21b 22 23 2 27 28a 28b	28c 29 X	
Full Name (Last, First, Middle Initial)  James Sprakties  Mailing Address 12228 Black Road  City State Zip Code IL 61270-  Purpose of Disbursement FEA Cnstring: Polit. Grassroots Candidate Name  Office Sought: House Primary General Disbursement For: Senate Primary General Type  Office Sought: House Spring State Zip Code IL 62708-  Purpose of Disbursement FEA Cnstring: Polit. Grassroots Candidate Name  Office Sought: House Primary General Disbursement For: State District:  Full Name (Last, First, Middle Initial) State District:  Full Name (Last, First, Middle Initial) State: District:  Full Name (Last, First, Middle Initial) State (Primary General Primary General Pr					
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City Alexandria	State Zip Code VA 22314-		Amount of Each	Disbursement this Period		
Purpose of Disbursement FEA Volunteer Mail-Kirk		•		89964.61		
Candidate Name		Category/ Type				
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	Purpose of Disbursement FEA Food & Beverages Reimbursement										191.1	2
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	Ryan Tracy								ement			
	Mailing Address 1214 Portner Rd.					1 1 1	M	<sup>D</sup> 1	<sup>D</sup> 2	Y	ž 0 ť	0 1
	City Alexandria	State Zip Code VA 22314-				Amo	unt of	Each	Disbu	rseme	ent this	Perio
	Purpose of Disbursement FEA Mileage Reimbursement			•				•			350.0	00
	Candidate Name			ate Typ	gory/ oe							
	Office Sought:    House   Disburs     Senate   President     State: District:	ement For: Primary General Other (specify)				FEA	MILE	EAGE	REII	MBUI	RSEM	IENT
_	olate. District.											

		3 (FEC Form 3X)		arate schedule(s)		E NUMBER:	PAGE 201 / 534
IT	EMIZED DI	SBURSEMENTS	for each	category of the Summary Page	(check or 21b 27	22 23 28a 28b	24 25 2 28c 29 X
		ed from such Reports and Starposes, other than using the r					
$\sum_{i}$	NAME OF COM Illinois Republ	MITTEE (In Full)	and and addre	or any pomioa		olot contributions from	
	Full Name (Last, Ryan Tracy	First, Middle Initial)				Transaction ID: Date of Disbursem	
	Mailing Address	1214 Portner Rd.				111 D 12	2 Y 2010
	City Alexandria		State VA	Zip Code 22314-		Amount of Each D	isbursement this Period
	Purpose of Disbu				• •		199.23
	Candidate Name				Category/ Type		
	Office Sought:	Senate President	ursement For: Primary Other (sp	General ecify) ▼		FEA TRAVEL RI	EIMBURSEMENT
	State:	District: First, Middle Initial)					04400 504457
	Lance Trover	r not, madic rintary				Transaction ID: Date of Disbursem	
	Mailing Address	616 N 5th St				10 14	2010
	City Vienna		State IL	Zip Code 62995-1633		Amount of Each D	isbursement this Period
	Purpose of Disbu FEA Cnslting: Po Candidate Name				Category/		3250.00
	Office Sought:	House Disbo	ursement For: Primary Other (sp	General ecify) ▼	Туре	FEA CNSLTING GRASSROOTS	: POLITICAL
		First, Middle Initial)				Transaction ID: Date of Disbursem	
	Mailing Address	616 N 5th St				10 28	2010
	City Vienna		State IL	Zip Code 62995-1633		Amount of Each D	isbursement this Period
	Purpose of Disbu				• •	L	3250.00
	Candidate Name				Category/ Type		
	Office Sought:	House Disb Senate President	ursement For: Primary Other (sp	General ecify) ▼		FEA CNSLTING GRASSROOTS	: POLITICAL
	State:	District:		···•			

	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	1	NE NUMBER: PAGE 202 / 534
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check o	nly one)  22 23 24 25 22 28a 28b 28c 29 X 3
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) Illinois Republican Party	c and address of any political		
	Full Name (Last, First, Middle Initial) Lance Trover			Transaction ID: 01130.E24557 Date of Disbursement
	Mailing Address 616 N 5th St			111 M / D D / Y 2010 Y
	City Vienna	State         Zip Code           IL         62995-1633		Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Cnsltng: Polit. Grassroots			3750.00
	Candidate Name		Category/ Type	
	Senate President	ement For: Primary General Other (specify)		FEA CNSLTNG: POLIT. GRASS- ROOTS
_	State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 01130.E24374
	Ty-comp			Date of Disbursement
	Mailing Address 1105 E. War Memorial D	Orive		111 D D D / Y 2010 Y
	City Peoria Heights	State Zip Code IL 61616-		Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Volunteer Mail-Schilling		•	1000.00
	Candidate Name		Category/ Type	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify) ▼		FEA VOLUNTEER MAIL-SCHILL- ING
	Full Name (Last, First, Middle Initial) United States Postal Service			Transaction ID: 01130.E24657 Date of Disbursement
	Mailing Address 411 E Monroe			M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Springfield	State Zip Code IL 62701-		Amount of Each Disbursement this Period
	Purpose of Disbursement FEA Volunteer Mail-Hultgren			8789.56
	Candidate Name		Category/ Type	
	Office Sought:  Senate  President  State:  Disburse  Disburse	ement For: Primary General Other (specify)		FEA VOLUNTEER MAIL-HULTGR- EN

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SCHEDULE B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	<u>-                                    </u>					
	Detailed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c 29 X 30k				
ny Information copied from such Reports and Statem for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
/ Illinois Republican Party								
Full Name (Last, First, Middle Initial)			Transaction ID: 0					
United States Postal Service			Date of Disbursemen					
Mailing Address 411 E Monroe			10 28	2010				
	State Zip Code IL 62701-		Amount of Each Disl	oursement this Period				
Springfield Purpose of Disbursement	IL 62701-			5728.04				
FEA Volunteer Mail-Hultgren								
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate	ment For:  Primary General		FEA VOLUNTEEF	R MAIL-HULTGR-				
President	Other (specify)		EN					
State: District:								
Full Name (Last, First, Middle Initial) Eric Voogd			Transaction ID: 0  Date of Disbursement					
Mailing Address 1028 N. Honroe Street			1 0 M / 2 2	Y 2010 Y				
	State Zip Code		Amount of Each Disl	oursement this Period				
	IL 60622-			750.00				
Purpose of Disbursement FEA CnsIting. Political Grassroots				700.00				
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		FEA CNSLTING. I GRASSROOTS	POLITICAL				
State: District:								
Full Name (Last, First, Middle Initial) Eric Wallace			Transaction ID: 0 Date of Disbursemen					
Mailing Address 5050 East End Ave. Unit 2A			10 28	2010				
•	State Zip Code IL 60615-		Amount of Each Disl	oursement this Period				
Chicago Purpose of Disbursement	IL 00013-			1500.00				
FEA Cnslting. Political Grassroots								
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)		FEA CNSLTING. I GRASSROOTS	POLITICAL				
State: District:								
SUBTOTAL of Disbursements This Page (optional) .		<u></u>		7978.04				
TOTAL This Period (last page this line number only)		<b>.</b>	<u> </u>					
E6AN026		-	FEC Schedule B	( Form 3X) (Revised 02				

ny Information copied from such Reports and Sta	for each category of the Detailed Summary Page	l È	ck only	,		
		Detailed Summary Page 21b 27				
for commercial purposes, other than using the n	tements may not be sold or used ame and address of any politica					
NAME OF COMMITTEE (In Full) Illinois Republican Party						
Full Name (Last, First, Middle Initial) Jennifer Wallace				Date of Disbu		
Mailing Address 5050 East End Ave. Unit 2A				10 /	28 7 2010	
City Chicago	State Zip Code IL 60615-			Amount of Ea	ch Disbursement this Period	
Purpose of Disbursement FEA Cnslting. Political Grassroots Candidate Name		Catego	ny/		1500.00	
	rrsement For:  Primary General  Other (specify) ▼	Type	-	FEA CNSLT GRASSROO	ING. POLITICAL DTS	
State: District:  Full Name (Last, First, Middle Initial)  Darva Watkins				<b>Transaction</b> Date of Disbu	ID: 01130.E24360 Irsement	
Mailing Address 6139 S. Bernon St.				10 M	28 7 2010	
City Chicago	State Zip Code IL 60637-			Amount of Ea	ch Disbursement this Period	
Purpose of Disbursement FEA Cnslting. Political Grassroots Candidate Name		Catego	ry/		700.00	
Office Sought: House Disbution Senate President State: District:	ursement For:  Primary General  Other (specify) ▼	Туре		FEA CNSLT GRASSROO	ING. POLITICAL DTS	
Full Name (Last, First, Middle Initial) David Watts				Date of Disbu		
Mailing Address 2500 North Van Dorn Apt #806	St.			10 /	D 1 4 Y 2 0 1 0 Y	
City Alexandria	State Zip Code VA 22302-			Amount of Ea	ch Disbursement this Period	
Purpose of Disbursement FEA Cnslting: Political Grassroots		·		L	4166.66	
Candidate Name		Catego Type				
Office Sought: House Disbution Senate President State: District:	rrsement For:  Primary General  Other (specify) ▼			FEA CNSLT GRASSROC	ING: POLITICAL DTS	
SUBTOTAL of Disbursements This Page (option	al)		•		6366.66	
FOTAL This Period (last page this line number of	nly)		<b>•</b>			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	)			INE NUMBER: PAGE 20 conly one)			205 /	534		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,		21b 27	22 28a		23 28b	24 28c	Н	25 29	26 X 30
Any Information copied from such Reports and Staten											
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	e and address of any politica	u com	ITTILLE	ee to st	DIICIL COLLI	ibulic	ons iro	om such	COMM	illee	
Illinois Republican Party											
Full Name (Last, First, Middle Initial) David Watts					Date	of Dis	burse		).E24	509	
Mailing Address 2500 North Van Dorn St. Apt #806					10	M /	<sup>D</sup> 2	8 /	ž	0 i 0	Y
City Alexandria	State Zip Code VA 22302-				Amou	int of	Each	Disburs	-	this P	
Purpose of Disbursement FEA Cnslting: Political Grassroots			•						410	00.00	
Candidate Name			atego Type	-							
Senate President	ement For: Primary General Other (specify)				FEA ( GRAS	CNSI SSR(	LTING	G: POL	ITICA	AL	
State: District:  Full Name (Last, First, Middle Initial)								0.1.10	. = 0.4		
David Watts					Date		burse				Υ
Mailing Address 2500 North Van Dorn St. Apt #806					1 1		1	5 /	2	0 Í 0	
City Alexandria	State Zip Code VA 22302-				Amou	int of	Each	Disburs	ement	this P	eriod
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots					L.				416	6.66	
Candidate Name		1	atego Type	•							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)				FEA (	CNS TS	LTNG	i: POLI	T. GI	RASS	S-
Full Name (Last, First, Middle Initial) Amanda Wears					Date	of Dis	burse		).E24	221	
Mailing Address 2008 W. Warner Avenue 1 E	)				1 0	M /	<sup>D</sup> 1	<b>4</b> /	ž	0 ť 0	Y
City Chicago	State Zip Code IL 60618-3910	)			Amou	int of	Each	Disburs	-		
Purpose of Disbursement FEA Payroll					L.		•		1/3	32.17	
Candidate Name			atego Type								
Senate President	ement For: Primary General Other (specify)				FEA I	PAYI	ROLL	-			
State: District:											
SUBTOTAL of Disbursements This Page (optional)	<u></u>			<u> </u>					1006	5.49	
TOTAL This Period (last page this line number only)				<b>•</b>							

50	CHEDULE E	3 (FEC Form 3	3X)	Use sepa	arate schedule(s)				NUMBE	ER:			PA	GE	206 /	534
ITI	EMIZED DIS	SBURSEMEN'	TS	for each	category of the Summary Page			eck onl 21b 27	22 28a	Н	23 28b		24 28c		25 29	X
		ed from such Reports														
	· · · · · · · · · · · · · · · · · · ·	poses, other than usir	ng the name	and addres	ss of any political	com	ımıtt	ee to so	olicit cont	rıbut	ions fr	om su	ch c	omm	ttee	
•	NAME OF COMM Illinois Republi	, ,														
	Full Name (Last, Amanda Wear	First, Middle Initial) s										: 01 ement		E24	302	
	Mailing Address	2008 W. Warne	er Avenue						1 <sup>M</sup> 0	М	/ D 2	28	Y	ž	) 1 O	Y
	City Chicago	1 2		State L	Zip Code 60618-3910				Amou	unt o	f Each	n Disbu	ırser			
	Purpose of Disbu FEA Payroll	rsement				Г	•		<u>L.</u>		-			173	2.18	-
	Candidate Name						ateg Type	-								
	Office Sought:	House Senate President		nent For: Primary Other (spe	General cify) ▼				FEA	PAY	'ROL	L				
	State:	District:														
	Full Name (Last, Amanda Wear	First, Middle Initial) s							Date	of D	isburs	: 01 ement				
	Mailing Address	2008 W. Warne 1 E	er Avenue						1 1	М	/ D .	15	Y	ž (	o ť o	Y
	City Chicago			State L	Zip Code 60618-3910				Amou	unt o	f Each	n Disbu	urser			erio
	Purpose of Disbu FEA Payroll	rsement					•							173	2.17	
	Candidate Name						ateg Typ	-								
	Office Sought:	House Senate President		nent For: Primary Other (spe	General cify) ▼				FEA	PAY	'ROL	L				
	State:	District:														
	Joe Weiss	First, Middle Initial)							Date	of D	isburs	: 01 ement				V
	Mailing Address	1683 Constitution	on Dr						1 <sup>M</sup> 0	М	/ D .	14	Y	Ž (	) ĺ O	Y
	City Glenview			State L	Zip Code 60026-7705				Amou	unt o	f Each	n Disbu	ırser	-		-
	Purpose of Disbu FEA Payroll	rsement					•		L.					188	4.04	
	Candidate Name						ateg Typ									
	Office Sought:	House Senate President		ment For: Primary Other (spe	General ecify) ▼				FEA	PAY	'ROL	L				
	State:	District:												_		

		Use separate schedule(s	)		R LINE eck only		п.			LA	GE	207/	534
IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a		23 28b	$\boldsymbol{\sqsubseteq}$	24 28c		25 29	20 X 30
	y Information copied from such Reports and Stater for commercial purposes, other than using the name												
	NAME OF COMMITTEE (In Full) Illinois Republican Party												
•	Full Name (Last, First, Middle Initial) Joe Weiss					Trans Date	of Di	sburs	emen				_
	Mailing Address 1683 Constitution Dr					1 <sup>M</sup> 0	M		2 8 2 8	/ L	ž (	) 1 0	<u> </u>
	City Glenview	State         Zip Code           IL         60026-7705	5			Amou	int of	Each	Disb	urser	-		eriod
	Purpose of Disbursement FEA Payroll Candidate Name		Ca	atego	ory/		•			•	100	4.05	•
	Office Sought:    House   Disburs     Senate   President     State: District:	ement For:  Primary General  Other (specify) ▼		Туре	9	FEA I	PAY	ROL	L				
	Full Name (Last, First, Middle Initial) Joe Weiss					Trans Date		sburs				389 0 1 0	Y
	Mailing Address 1683 Constitution Dr												
	City Glenview Purpose of Disbursement	State         Zip Code           IL         60026-7705	; 			Amou	int of	Each	Dist	ourser		this P	eriod
	FEA Payroll  Candidate Name			atego Type	-			•		•			
	Office Sought:  Senate President  State:  Disburs	ement For:  Primary General  Other (specify) ▼	<u> </u>	i yp.		FEA I	PAY	ROL	L				
	Full Name (Last, First, Middle Initial) Andrew Weissert					Trans Date	of Di	sburs	emen				_
	Mailing Address 2683 Stewart Avenue					1 <sup>M</sup> 0	M	<sup>D</sup> 1	<b>4</b>	/ L	ž	) 1 0	Y
	City Evanston	State Zip Code IL 60201-				Amou	int of	Each	Disb	urser			eriod
	Purpose of Disbursement FEA Cnslting: Political Grassroots Candidate Name			atego		L.					60	0.00	
	Office Sought: House Senate President State: District:	ement For:  Primary General  Other (specify) ▼	<u> </u>	Тур	Э	FEA ( GRAS	CNS SSR	SLTIN OOT	IG: F S	POLI	TICA	۸L	
Г	<b> </b>						-						

SCHEDOLE B (I LC I OIIII 5X)	Use separate schedule(s) (check c	NE NUMBER: PAGE 208 / 534 only one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page  21b 27	22 23 24 25 2 28a 28b 28c 29 X
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) Illinois Republican Party		
Full Name (Last, First, Middle Initial) Andrew Weissert		Transaction ID: 01130.E24510 Date of Disbursement
Mailing Address 2683 Stewart Avenue		10
City Evanston	State Zip Code IL 60201-	Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting: Political Grassroots		600.00
Candidate Name  Office Sought: House Disbu	Category/ Type	
Senate President State: District:	Primary General Other (specify)	FEA CNSLTING: POLITICAL GRASSROOTS
Full Name (Last, First, Middle Initial) Andrew Weissert		Transaction ID: 01130.E24559 Date of Disbursement
Mailing Address 2683 Stewart Avenue		111 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Evanston	State Zip Code IL 60201-	Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots		1100.00
Candidate Name	Category/ Type	
Office Sought: House Disbu	rsement For: Primary General Other (specify)	FEA CNSLTNG: POLIT. GRASS-ROOTS
Full Name (Last, First, Middle Initial) Jay Werner		Transaction ID: 01130.E24356 Date of Disbursement
Mailing Address 4834 W. Argyle St.		10 M / 28 / Y Y Y Y Y Y
City Chicago	State Zip Code IL 60630-	Amount of Each Disbursement this Perio
Purpose of Disbursement FEA Cnslting. Political Grassroots Candidate Name	Category/ Type	1800.00
Office Sought: House Disbution Senate President State: District:	rsement For: Primary General Other (specify)	FEA CNSLTING. POLITICAL GRASSROOTS

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)			check or	E NUMBI	=H:			PA	JE_	209 /	534
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a		23 28b	_	24 28c		25 29	2   X 3
	y Information copied from such Reports and State for commercial purposes, other than using the na												
$\vdash$	NAME OF COMMITTEE (In Full)												
$\rangle$	Illinois Republican Party												
	Full Name (Last, First, Middle Initial) David Wilson							on ID sburs			E24	312	
	Mailing Address 222 E. Chestnut St.					1 0	M /		2 8	/ Y	ž	0 ť 0	Y
	Unit 8B	State Zip Code				Amo	unt of	Each	Dish	urser	nent	this P	Period
	Chicago	IL 60611-									-	0.00	
	Purpose of Disbursement FEA Chalting. Political Grassroots						-	-			140	0.00	-
	Candidate Name				egory/ vpe								
	Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify)				FEA GRA	CNS SSR	LTIN OOT	IG. P	OLI	ΓICA	<b>AL</b>	
	Full Name (Last, First, Middle Initial)					Tran	eacti	on ID	· 01	130	F2/	171	
	Wolfe Rewards & Loyalty					1		sburs	emen				Y
	Mailing Address 495 Mansfield Ave					1 0		2	26	Ĺ	2 (	0 ť 0	
	City Pittsburgh	State Zip Code PA 15205-				Amo	unt of	Each	Disb	urser	nent	this P	Period
	Purpose of Disbursement FEA Trvl & MIs-no vend. itemiz. req			-		] L.				5	978	5.60	_
	Candidate Name		ı		egory/ /pe								
	Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼				FEA ITEM	TRV IIZ. F	L&N REQ	ЛLS-	NO V	√EN	D.	
	Full Name (Last, First, Middle Initial) Alexander George Yergin					1		on ID sburs			E24	528	
	Mailing Address 2101 16th Street NW #	718				1 1	M	D 1	1 D	/ Y	ž (	0 Ť 0	Y
	City Washington	State Zip Code DC 20009-				Amo	unt of	Each	Disb	urser	nent	this P	Period
	Purpose of Disbursement FEA Travel Reimbursement					Ţ L.					49	4.25	
	Candidate Name				egory/ /pe								
	Office Sought: House Senate President State: District:	sement For: Primary General Other (specify)				FEA	TRA	VEL	REIN	//BUI	RSE	MEN	ΝT
	otate. District.									6	_		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 210/534
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 2 28a 28b	24 25 26 28c 29 X 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)  Illinois Republican Party	e and address of any political of	ommittee to sor	ici contributions from	1 Such Committee
Full Name (Last, First, Middle Initial)  Mike Zolnierowicz			Transaction ID: Date of Disbursen	
Mailing Address 3648 Venard Rd			10 / 14	2010
Downers Grove	State         Zip Code           IL         60515-1349		Amount of Each D	isbursement this Period
Purpose of Disbursement FEA Cnslting: Political Grassroots Candidate Name		Catagony		3500.00
	ement For:	Category/ Type	== 4 0000 =000	DOLUTION.
Senate President State: District:	Primary General Other (specify)		FEA CNSLTING GRASSROOTS	: POLITICAL
Full Name (Last, First, Middle Initial) Mike Zolnierowicz			Transaction ID: Date of Disbursen	
Mailing Address 3648 Venard Rd			10 28	2 0 1 0 Y
City Downers Grove	State         Zip Code           IL         60515-1349		Amount of Each D	isbursement this Period
Purpose of Disbursement FEA Cnslting: Political Grassroots Candidate Name		Category/		3500.00
	ement For:	Type		. DOLITICAL
Senate President State: District:	Primary General Other (specify) ▼		FEA CNSLTING GRASSROOTS	. POLITICAL
Full Name (Last, First, Middle Initial) Mike Zolnierowicz			Transaction ID: Date of Disbursen	nent
Mailing Address 3648 Venard Rd			11 1 1 5	2010
Downers Grove	State         Zip Code           IL         60515-1349		Amount of Each D	isbursement this Period 6500.00
Purpose of Disbursement FEA Cnsltng: Polit. Grassroots Candidate Name		Category/ Type		
Office Sought:    House   Disburse     Senate   President     State: District:	ement For: Primary General Other (specify)		FEA CNSLTNG: ROOTS	POLIT. GRASS-
SUBTOTAL of Disbursements This Page (optional)				13500.00
TOTAL This Period (last page this line number only)				869837.59

PAGE 211 / 534	
FOR LINE 18a OF FOR	м зх

NAME OF COMMITTEE (In Full)		TOTTE INE TOUGHT OF HIM ON
Illinois Republican Party		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	2337.32
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		2337.32 Transaction ID: H3C322849
ii) Generic Voter Drive		Transaction ID:
III) François Anticiales		
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event	Identifier)	
a)		Transaction ID:
b)		Transaction ID:
v) Direct Candidate Support (List of Activity)	ty or Event Identifier)	Transaction ID:
b)	_	Transaction ID:
c) Total Amount Transferred For Direct C	andidate Support	
vi) Public Communications Referring Only	to Party (Made by PAC)	
TOTAL	S FOR BREAKDOWN OF TRANSFER RECEI	Transaction ID:
Г	OTOTI BILLING OWN OF THUMOF EITHEOLI	VLD
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)		
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring		
TOTAL This Period (Total Amount Transferred)		

PAGE 212 / 534
FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)		FOR LINE 164 OF FORIVI 3A
· · ·		
Illinois Republican Party		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M / D D / Y Y Y	
Cole Taylor Non-F	1 0 1 8 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	395.00
BREAKDOWN OF TRANSFER RECEIVED		
		395.00
i) Total Administrative		Transaction ID: H3C322850
ii) Generic Voter Drive		
ii) Generic voter brive		Transaction ID:
iii) Exempt Activities		
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event	Identifier)	Transaction 15.
(Lot roams) (Lot roams) or Event		
a)		Transaction ID:
a)		
		TID
b)	_	Transaction ID:
c) Total Amount Transferred for Direct Fund	draising	
v) Direct Candidate Support (List of Activity	y or Event Identifier)	
		T
a)		Transaction ID:
		Transaction ID:
b)		Transaction is.
c) Total Amount Transferred For Direct Ca	andidate Support	
vi) Public Communications Referring Only	to Party (Made by PAC)	Transaction ID:
TOTAL	S FOR BREAKDOWN OF TRANSFER RECEIN	
TOTAL	5 FOR BREAKDOWN OF TRANSFER RECEIV	VED
TOTAL This Period (Administrative)		
<b></b>		
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)		
TOTAL TIME FORCE (Exemperiod vision)		
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL THE DESCRIPTION OF THE DESCRIPTION	Och to Both	
TOTAL This Period (Public Communications Referring	Only to Party)	
TOTAL This Period (Total Amount Transferred)		
TOTAL THIS FORM (TOTAL AMOUNT THANSIETEM)		
-		

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)		•
Illinois Republican Party		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	395.00
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative		395.00 Transaction ID: H3C322851
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event Ide	entifier)	Transaction ID:
a)		Transaction ID:
b)		Transaction ID:
b)		Transaction ID: Transaction ID:
c) Total Amount Transferred For Direct Candi		
vi) Public Communications Referring Only to	Party (Made by PAC)	Transaction ID:
TOTALS F	OR BREAKDOWN OF TRANSFER RECE	
TOTAL This Period (Administrative)		
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)		
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring Onl		
TOTAL This Period (Total Amount Transferred)		

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FOR LINE 18a OF FORM 3X	I

NAME OF COMMITTEE (In Full)		FOR LINE 164 OF FORM 3A				
Illinois Republican Party						
minois republican ranty						
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED				
IL Republican Party Cole Taylor Non-F	M M / D D / Y Y Y Y Y Y 1 2 0 1 0	38760.02				
BREAKDOWN OF TRANSFER RECEIVED		00700.00				
i) Total Administrative	38760.02 Transaction ID: H3C322853					
ii) Generic Voter Drive		Transaction ID:				
iii) Exempt Activities		Transaction ID:				
iv) Direct Fundraising (List Activity or Event Id	entifier)					
a)		Transaction ID:				
b)		Transaction ID:				
c) Total Amount Transferred for Direct Fundraising						
b)	_	Transaction ID:				
c) Total Amount Transferred For Direct Can	didate Support					
vi) Public Communications Referring Only to	Party (Made by PAC)	Transaction ID:				
TOTALS	FOR BREAKDOWN OF TRANSFER RECEIV	/ED				
TOTAL This Period (Administrative)						
TOTAL This Period (Generic Voter Drive)						
TOTAL This Period (Exempt Activities)						
TOTAL This Period (Direct Fundraising)						
TOTAL This Period (Direct Candidate Support)						
TOTAL This Period (Public Communications Referring Or	nly to Party)					
TOTAL This Period (Total Amount Transferred)						

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FOR LINE 18a OF FORM 3X		

NAME OF COMMITTEE (In Full)		TOTTENE TOUGHT FOR THE
Illinois Republican Party		
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	1.0 / D D / Y Y Y Y Y Y 2 0 1 0	11850.00
BREAKDOWN OF TRANSFER RECEIVED		
i) Total Administrative	11850.00 Transaction ID: H3C322854	
ii) Generic Voter Drive	Transaction ID:	
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event lo		Transaction ID:
,	,	1
a)		Transaction ID:
b)	_	Transaction ID:
c) Total Amount Transferred for Direct Fundr	aising	
v) Direct Candidate Support (List of Activity	or Event Identifier)	
		7
a)		Transaction ID:
b)	_	Transaction ID:
c) Total Amount Transferred For Direct Can		
vi) Public Communications Referring Only to	o Party (Made by PAC)	
TOTALS	FOR BREAKDOWN OF TRANSFER RECEIV	Transaction ID:
	TOR BREAKDOWN OF TRANSFER RECEIV	/LD
TOTAL This Period (Administrative)		
TOTAL This Period (Generic Voter Drive)		
TOTAL This Period (Exempt Activities)		
TOTAL This Period (Direct Fundraising)		
TOTAL This Period (Direct Candidate Support)		
TOTAL This Period (Public Communications Referring O	nly to Party)	
TOTAL This Period (Total Amount Transferred)		

FRANSFERS FROM NONFEDERAL A ALLOCATED FEDERAL / NONFEDER			PAGE 216 / 534 FOR LINE 18a OF FORM 3X
NAME OF COMMITTEE (In Full)			FOR LINE 188 OF FORM 37
Illinois Republican Party			
NAME OF ACCOUNT	DATE OF RECEIPT	то	TAL AMOUNT TRANSFERRED
IL Republican Party Cole Taylor Non-F	M M / D D / Y	2010	14221.09
BREAKDOWN OF TRANSFER RECEIVED			
i) Total Administrative		Tra	14221.09 ansaction ID: H3C322856
ii) Generic Voter Drive			ansaction ID:
iii) Exempt Activities			ansaction ID:
iv) Direct Fundraising (List Activity or Event Ide	entifier)		
a)		Tra	ansaction ID:
b)		Tra	ansaction ID:
c) Total Amount Transferred for Direct Fundrai  v) Direct Candidate Support (List of Activity or  a)	r Event Identifier)	Tue	nsaction ID:
b)			ensaction ID:
c) Total Amount Transferred For Direct Cand vi) Public Communications Referring Only to			saction ID:
TOTALS F	OR BREAKDOWN OF TRANS	SFER RECEIVED	
TOTAL This Period (Administrative)	67958.43		
TOTAL This Period (Generic Voter Drive)	L	0.00	_
TOTAL This Period (Exempt Activities)	L	0.00	<u></u>
TOTAL This Period (Direct Fundraising)		0.0	00
TOTAL This Period (Direct Candidate Support)			0.00
TOTAL This Period (Public Communications Referring On	ly to Party)		0.00
TOTAL This Period (Total Amount Transferred)		L	67958.43

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FOR	LINE 21a OF FORM 3X

				FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)				
Illinois Republican Party				
A. Full Name (Last, First, N	/liddle Initial)			Type of Allocated Activity:
Advantage Payroll Ser	vices			X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
1000 E Warrenville Rd				
City	State	Zip Code	-	Public Comm (ref to party only) by PAC
Naperville	<u>IL</u>	60563-1867		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Payroll Service Fees			Category/ Type	430547.15
Activity or Event Identifier: ADMINISTRATION B 31			,	Date 1 0 1 4 2 0 1 0 Transaction ID: H401130.E24226
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	6.14		23.10	29.24
B. Full Name (Last, First, N	Middle Initial)			Type of Allocated Activity:
Ace Sign Co.				Administrative Fundraising Exempt
Mailing Address 402 N. Fourth St.				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Springfield	IL	62702-	' '	Allocated Activity or Event Year-To-Date
Purpose of Disbursement:			Catagory	431334.94
Party Printing			Category/ Type	431334.94
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 0 1 5 2 0 1 0 Transaction ID: H401130.E24229
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	82.95		312.05	395.00
C. Full Name (Last, First, MAloha Document Servi	Middle Initial) ces, Inc.			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
60 E. Van Buren St.	S-1502			
City	State	Zip Code	_	Public Comm (ref to party only) by PAC
Chicago	IL	60605-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Generic Party Printing			Category/ Type	433236.48
Activity or Event Identifier:			1 1 1 1 1	M M / D D / Y Y Y Y
ADMINISTRATION B 31				Date 1 0 1 5 2 0 1 0 Transaction ID: H401130.E24230
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
			1 1 1 1	450.00
	96.56		363.27	459.83
SUBTOTAL of Allocated Feder	ral and NonFederal A	Activity This Page		
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	185.65		698.42	884.07
TOTAL This Period (last page FEDERAL S	• / (	( / ( /		. , , , ,
FEDERAL S	PHARE	NONFEDERA	L SHARE	TOTAL AMOUNT

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FOR	LINE	212	OF	FORM 3X

: 222:::::::::::::::::::::::::::::::::				FOR LINE 21a OF FORM 3X
NAME OF COMMIITTEE (In Full	)			
Illinois Republican Party				
<b>A.</b> Full Name (Last, First, I Building Maintenance	Middle Initial) Services			Type of Allocated Activity:
Mailing Address				X Administrative Fundraising Exempt
3260 Northfield Dr.				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Springfield	IL	62702-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Janitorial Service			Category/ Type	431724.94
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 0 1 5 2 0 1 0 Transaction ID: H401130.E24232
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	81.90		308.10	390.00
<b>B.</b> Full Name (Last, First, I Having A Ball Product	Middle Initial) ions			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
1935 S. 10 1/2 St.	Ctata	Zin Code	1	Public Comm (ref to party only) by PAC
City Springfield	State IL	Zip Code 62703-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:		02700-	-	
Party Decorations			Category/ Type	432134.94
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 0 1 5 2 0 1 0 Transaction ID: H401130.E24234
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	86.10		323.90	410.00
C. Full Name (Last, First, I FedEx	Middle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
P.O. Box 727				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Memphis Purpose of Disbursement:	TN	38101-2112		Allocated Activity or Event Year-To-Date
Parcel Delivery			Category/ Type	430939.94
Activity or Event Identifier: ADMINISTRATION B 31				Date 1.0 1.5 2.010
ADMINISTRATION D 31				Transaction ID: H401130.E24235
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	82.49		310.30	392.79
SUBTOTAL of Allocated Fede	ral and NonFederal	Activity This Page		
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	250.49		942.30	1192.79
TOTAL This Period (last page	for each line only)(	Federal share to 21(a)(i) and	NonFederal sha	re to 21(a)(i))
LLINEDAL	• , ,	, , , , ,	AL SHADE	. , , , ,
FEDERAL S	• , ,	NONFEDERA	AL SHARE	TOTAL AMOUNT
FEDERALS	• , ,	, , , , ,	AL SHARE	. , , , ,

PAGE	2	19 /	534	FORM 3X
FOR	LINE	21a	OF	FORM 3X

I EBENAE/NOM EBE		• •		1	FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)					
Illinois Republican Party					
A. Full Name (Last, First, M	iiddle Initial)			Type of Allocated Activity:	
LexisNexis	iddle iffilial)			1 <del></del>	undraising Exempt
Mailing Address					and along
P.O. Box 2314					irect Candidate Support
City	State	Zip Code		Public Comm (ref to p	• • • •
Carol Stream	IL	60132-		Allocated Activity or Eve	ent Year-To-Date
Purpose of Disbursement: Research Application			Category/ Type	L	432776.65
Activity or Event Identifier: ADMINISTRATION B 31			1 1/20	Date 1.0 1.5  Transaction ID: H401	2 0 1 0 130.E24236
FEDERAL SH	HARE	+ NONFEDERAL	SHARE	= TOTAL A	
	79.53		299.18		378.71
B. Full Name (Last, First, M	iddle Initial)			Type of Allocated Activity:	
Party Creations				Administrative F	undraising Exempt
Mailing Address				Voter Drive D	irect Candidate Support
3651 S. 6th St.	P.O. Box 3			Public Comm (ref to p	party only) by BAC
City	State IL	Zip Code 62708-		Allocated Activity or Eve	
Springfield  Purpose of Disbursement:		02700-		Allocated Activity of Lve	
Equipment Rental			Category/ Type		432397.94
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 0 1 5  Transaction ID: H401	130.E24237
FEDERAL SH		+ NONFEDERAL	SHARE	= TOTAL A	
	55.23		207.77		263.00
<u> </u>				1=	
C. Full Name (Last, First, M Illinois Department of A	iddle Initial) ariculture			Type of Allocated Activity:	
<u>-</u>	griculture			1=	undraising L Exempt
Mailing Address P.O. Box 19427				Voter Drive D	irect Candidate Support
City	State	Zip Code		Public Comm (ref to p	party only) by PAC
Springfield	IL	62794-9427		Allocated Activity or Eve	ent Year-To-Date
Purpose of Disbursement: DuQuoin Fair Cart Ren	tal		Category/		469652.32
Activity or Event Identifier:			Туре	M M / D D	
ADMINISTRATION B 31				Date 1.0 2.1	
FEDERAL SI		+ NONFEDERAL	CHADE	Transaction ID: H401	
I EDETAL SI	1 1 1 1	+ NONFEDERAL	1 1 1	- IOTAL A	
	192.15		722.85		915.00
SUBTOTAL of Allocated Federa	al and NonFederal /	Activity This Page			
FEDERAL SH	HARE	+ NONFEDERAL	SHARE	= TOTAL A	MOUNT
	326.91		1229.80		1556.71
TOTAL This Period (last page f	• , ,	. , . ,		. , . , ,	MOUNT
FEDERAL SH	1AKE	NONFEDERA	AL SHARE	TOTAL A	MOUNI

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	FOR	LINE	212	OF	FORM 3X	

	,		FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
A. Full Name (Last, First, Middle Initial) Home City Ice			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			
P.O. Box 111116			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Cincinnati OH	45211-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Ice and Beverages		Category/ Type	449276.58
Activity or Event Identifier: ADMINISTRATION B 31			Date 1 0 2 1 2 0 1 0  Transaction ID: H401130.E24246
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
127.26		478.74	606.00
<b>B.</b> Full Name (Last, First, Middle Initial) Quicksilver Mailing Services			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address PO Box 1454			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Springfield IL	62705-1454		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Generic Non-FEA NoCand Mail Service	ce	Category/ Type	434440.30
Activity or Event Identifier: ADMINISTRATION B 31			Date 1 0 2 1 2 0 1 0 Transaction ID: H401130.E24247
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
252.80		951.02	1203.82
C. Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
205 Pennsylvania Ave., SE			<u>'</u>
City State	Zip Code		Public Comm (ref to party only) by PAC
Washington DC	20003-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Computer Software		Category/ Type	435015.30
Activity or Event Identifier: ADMINISTRATION B 31			Date 1 0 2 1 2 0 1 0 Transaction ID: H401130.E24248
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
120.75		454.25	575.00
OUDTOTAL of Aller and Fordered and No. Fordere	LANCE THE Day		
SUBTOTAL of Allocated Federal and NonFedera	, ,		
FEDERAL SHARE	+ NONFEDERAL		= TOTAL AMOUNT
500.81		1884.01	2384.82
TOTAL This Period (last page for each line only)	( ) ( )		. , , , ,
FEDERAL SHARE	NONFEDERA	L SHARE	TOTAL AMOUNT

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FOR	LINE	212	OF	FORM 3X			

I EDENAL/NOW EDENAL AC			FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
A. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
Aristotle International			Administrative Fundraising Exempt
Mailing Address 205 Pennsylvania Ave., SE			☐ Voter Drive ☐ Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Washington DC	20003-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Computer Software		Category/ Type	435590.30
Activity or Event Identifier: ADMINISTRATION B 31		71	Date 1 0 2 1 2 0 1 0  Transaction ID: H401130.E24249
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
120.75		454.25	575.00
<b>B.</b> Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
205 Pennsylvania Ave., SE	7:- O1-	ı	Public Comm (ref to party only) by PAC
City State Washington DC	Zip Code 20003-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:	20003-		
Computer Software		Category/ Type	436165.30
Activity or Event Identifier: ADMINISTRATION B 31			Date 1.0 2.1 2.010  Transaction ID: H401130.E24250
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
120.75		454.25	575.00
C. Full Name (Last, First, Middle Initial) Ace Sign Co.			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
402 N. Fourth St.			
City State	Zip Code		Public Comm (ref to party only) by PAC
Springfield IL  Purpose of Disbursement:	62702-		Allocated Activity or Event Year-To-Date
Party Printing		Category/ Type	437242.30
Activity or Event Identifier:		, ,,	Date 10 21 2010
ADMINISTRATION B 31			Transaction ID: H401130.E24251
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
105.42		396.58	502.00
SUBTOTAL of Allocated Federal and NonFed	deral Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
346.92		1305.08	1652.00
TOTAL This Period (last page for each line of	only)(Federal share to 21(a)(i) and	NonFederal sha	re to 21(a)(i))
FEDERAL SHARE	NONFEDERA		TOTAL AMOUNT
	'		

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	FOR	LINE	21a	OF	FORM 3X	

I EBERAE/NOM EBERA					FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)					
Illinois Republican Party					
A. Full Name (Last, First, Middle	Initial)			Type of Allocated Activity	y:
Adlexx Corporation	<u> </u>				Fundraising Exempt
Mailing Address				Voter Drive	Direct Candidate Support
PO Box 9594	<del> </del>	7: 0 1	Т	Public Comm (ref to	
City Sta Springfield IL	ate.	Zip Code 62791-9594		Allocated Activity or E	
Purpose of Disbursement:		02791-9394		Allocated Activity of L	
St. Fair Banner No Fed Can	d.		Category/ Type		468104.21
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 0 2  Transaction ID: H40	1130.E24255
FEDERAL SHARE	+	NONFEDERAL	SHARE	·	. AMOUNT
128	3.07		481.81		609.88
B. Full Name (Last, First, Middle	Initial)			Type of Allocated Activity	y:
Party Creations				Administrative	Fundraising Exempt
Mailing Address	D O D 0474			Voter Drive	Direct Candidate Support
3651 S. 6th St.  City Sta	P.O. Box 3172	Zip Code	I	Public Comm (ref to	party only) by PAC
Springfield IL	iie	62708-		Allocated Activity or E	
Purpose of Disbursement:			Catagory		437824.78
Equipment Rental			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 0 2  Transaction ID: H40	1130.E24256
FEDERAL SHARE	+	NONFEDERAL	SHARE		. AMOUNT
122	2.32		460.16		582.48
C. Full Name (Last, First, Middle Northfield Inn & Suites	Initial)			Type of Allocated Activity  Administrative	y: Fundraising Exempt
Mailing Address					Direct Candidate Support
3280 Northfield Dr					
City Sta	ate	Zip Code		,	party only) by PAC
Springfield IL Purpose of Disbursement:		62702-1400		Allocated Activity or E	
Party Room Rental and Cat	ering		Category/ Type		452147.33
Activity or Event Identifier:			Гурс	M M / D	D / Y Y Y Y
ADMINISTRATION B 31				Date 1.0 2 Transaction ID: H40	1 2 0 1 0 1130.E24257
FEDERAL SHARE	+	NONFEDERAL	SHARE	•	. AMOUNT
276	3.03		1038.42		1314.45
			171111		1 11 11 1
SUBTOTAL of Allocated Federal and	NonFederal Acti	vity This Page			
FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL	. AMOUNT
526	.42		1980.39		2506.81
TOTAL This Period (last page for ea	• / (	( / ( /		` ' ' ' ' '	AMOLINT
FEDERAL SHARE	<del> </del>	NONFEDERA	LOTANE	TOTAL	. AMOUNT

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FOR	LINE	21a	OF	FORM 3X

				FOR LINE 21a OF FORM	<u> 13X</u>
NAME OF COMMITTEE (In Full)					
Illinois Republican Party					
<b>A.</b> Full Name (Last, First, M Wells Fargo Financial L	iddle Initial) Leasing			Type of Allocated Activity:  X Administrative Fundraising Exempt	
Mailing Address					
PO Box 7777				Voter Drive Direct Candidate Support	
City	State	Zip Code		Public Comm (ref to party only) by PAC	
San Francisco	CA	94120-7777		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Postage Meter Lease			Category/ Type	450832.88	
Activity or Event Identifier: ADMINISTRATION B 31			,	Date 1 0 2 1 2 0 1 0 Transaction ID: H401130.E24258	
FEDERAL SH	HARE H	- NONFEDERAL	SHARE	= TOTAL AMOUNT	
	326.82		1229.48	1556.30	
<b>B.</b> Full Name (Last, First, M Uncle Joes Sauces & R	iddle Initial) lubs			Type of Allocated Activity:  X Administrative Fundraising Exempt	
Mailing Address				Voter Drive Direct Candidate Support	
201 N. Avenue City	State	Zip Code	Γ	Public Comm (ref to party only) by PAC	
Ina	IL	62846-		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: St.Fair Food & Bvgs. N			Category/ Type	474505.82	
Activity or Event Identifier: ADMINISTRATION B 31			7,	Date 1.0 2 1 2 0 1 0  Transaction ID: H401130.E24259	
FEDERAL SI	HARE H	+ NONFEDERAL	SHARE	= TOTAL AMOUNT	
	1019.24		3834.26	4853.50	
C. Full Name (Last, First, M Aristotle International	iddle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt	
Mailing Address				Voter Drive Direct Candidate Support	
205 Pennsylvania Ave.,				Public Comm (ref to party only) by PAC	
City Washington	State DC	Zip Code 20003-		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Computer Software		20003-	Category/	436740.30	
Activity or Event Identifier:			Туре	M M / D D / Y Y Y	
ADMINISTRATION B 31				Date 1 0 2 1 2 0 1 0 Transaction ID: H401130.E24260	
FEDERAL SI	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	120.75		454.25	575.00	
	120.70		707.20	373.00	
SUBTOTAL of Allocated Federa	al and NonFederal A	ctivity This Page			
FEDERAL SI	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	1466.81		5517.99	6984.80	
TOTAL This Period (last page 1					
FEDERAL SH	IANE	NONFEDERA	L SHARE	TOTAL AMOUNT	
		L			

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FOR	LINE	21a	OF	FORM 3X

					FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)					
Illinois Republican Party					
A Full Name (Leat First Middle	lo Initial\			Type of Allocated Activity:	
A. Full Name (Last, First, Middl FedEx Office	ie iriiliai)				
Mailing Address					and along
Customer Administrative S	SeRvi <b>©es</b> Box 672	085		Voter Drive	Direct Candidate Support
	State	Zip Code		Public Comm (ref to	party only) by PAC
,	ГХ	75267-		Allocated Activity or Ev	ent Year-To-Date
Purpose of Disbursement: Parcel Delivery			Category/ Type		476938.07
Activity or Event Identifier: ADMINISTRATION B 31			ј туре	Date 1.0 2	1 2 0 1 0 130.E24262
FEDERAL SHAR	RE +	NONFEDERAL	SHARE		AMOUNT
	10.77		1921.48		2432.25
<b>B.</b> Full Name (Last, First, Middl City Water Light & Power	le Initial)			Type of Allocated Activity:	
Mailing Address					Fundraising Exempt
Municipal Center West				Voter Drive	Direct Candidate Support
	State	Zip Code		Public Comm (ref to	party only) by PAC
Springfield II	L	62757-		Allocated Activity or Ev	ent Year-To-Date
Purpose of Disbursement: Utilities			Category/ Type		448670.58
Activity or Event Identifier: ADMINISTRATION B 31			1 1950	Date 1.0 2	
				I Transcation ID: 11404	
FEDERAL SHAR	RF ±	NONFEDERAL	SHARE	•	130.E24263 AMOLINT
FEDERAL SHAR		NONFEDERAL	1 1 1 1	•	AMOUNT
	96.43 +	NONFEDERAL	SHARE 1115.14	•	
C. Full Name (Last, First, Middl	96.43	NONFEDERAL	1 1 1 1	•	1411.57
29	96.43	NONFEDERAL	1 1 1 1	= TOTAL A  Type of Allocated Activity:	1411.57
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address	96.43 le Initial) , Inc.	NONFEDERAL	1 1 1 1	Type of Allocated Activity:  X Administrative F	AMOUNT  1411.57  Fundraising Exempt
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.	96.43		1 1 1 1	Type of Allocated Activity:  X Administrative F Voter Drive [	AMOUNT  1411.57  Fundraising Exempt  Direct Candidate Support
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.	96.43 le Initial) , Inc. S-1502 State	Zip Code	1 1 1 1	TOTAL A  Type of Allocated Activity:  X Administrative F  Voter Drive F  Public Comm (ref to	Tundraising Exempt  Direct Candidate Support party only) by PAC
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St. City S Chicago	96.43 le Initial) , Inc. S-1502 State		1 1 1 1	Type of Allocated Activity:  X Administrative F Voter Drive [	Tundraising Exempt  Direct Candidate Support party only) by PAC
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.	96.43 le Initial) , Inc. S-1502 State	Zip Code	1 1 1 1	TOTAL A  Type of Allocated Activity:  X Administrative F  Voter Drive F  Public Comm (ref to	Tundraising Exempt  Direct Candidate Support party only) by PAC
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City S. Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier:	96.43 le Initial) , Inc. S-1502 State	Zip Code	1115.14 Category/	Type of Allocated Activity:  X Administrative F Voter Drive C Public Comm (ref to Allocated Activity or Ev	Fundraising Exempt Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St. City S Chicago III Purpose of Disbursement: Generic Party Printing	96.43 le Initial) , Inc. S-1502 State	Zip Code	1115.14 Category/	Type of Allocated Activity:  Administrative F Voter Drive Comm (ref to Allocated Activity or Ev	Fundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City S. Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier:	96.43 le Initial) , Inc. S-1502 State L	Zip Code	Category/ Type	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date  1 0 2  Transaction ID: H401	Fundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City St.  Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR	96.43 le Initial) , Inc. S-1502 State L	Zip Code 60605-	Category/ Type	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date  1 0 2  Transaction ID: H401	Fundraising Exempt  Eundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date  468737.32  201 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City St.  Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR	96.43 le Initial) , Inc. S-1502 State L	Zip Code 60605-	Category/ Type	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date  1 0 2  Transaction ID: H401	Fundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City St.  Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR	96.43 le Initial) , Inc. S-1502 State L  RE + 32.95	Zip Code 60605-	Category/ Type	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date  1 0 2  Transaction ID: H401	Fundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City S. Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR	96.43 le Initial) , Inc. S-1502 State L  RE + 32.95	Zip Code 60605-	Category/ Type SHARE 500.16	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date  1 0  Transaction ID: H401  TOTAL	Fundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32  Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City S. Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR  13  SUBTOTAL of Allocated Federal ar FEDERAL SHAR	96.43 le Initial) , Inc. S-1502 State L  RE + 32.95	Zip Code 60605- NONFEDERAL tivity This Page NONFEDERAL	Category/ Type SHARE 500.16	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date  1 0  Transaction ID: H401  TOTAL	Fundraising Exempt Direct Candidate Support party only) by PAC ent Year-To-Date 468737.32  1
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City St.  Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR  13  SUBTOTAL of Allocated Federal ar  FEDERAL SHAR  94	96.43 le Initial) , Inc. S-1502 State L  32.95 and NonFederal Act RE + 0.15	Zip Code 60605- NONFEDERAL tivity This Page NONFEDERAL	Category/ Type  SHARE 500.16  SHARE 3536.78	Type of Allocated Activity:  X Administrative Voter Drive Public Comm (ref to Allocated Activity or Ev  Date 1 0 Transaction ID: H401  TOTAL	Fundraising Exempt  Eundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date  468737.32  Direct Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City S. Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR  13  SUBTOTAL of Allocated Federal ar FEDERAL SHAR 94	96.43 le Initial) , Inc. S-1502 State L  32.95 and NonFederal Act RE + -0.15 each line only)(Federal NonFederal Act	Zip Code 60605- NONFEDERAL tivity This Page NONFEDERAL	Category/ Type  SHARE 500.16  SHARE 3536.78  NonFederal sha	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date 1 0 2 Transaction ID: H401  TOTAL A  re to 21(a)(i))	Fundraising Exempt  Eundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date  468737.32  Direct Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. Full Name (Last, First, Middl Aloha Document Services, Mailing Address 60 E. Van Buren St.  City S. Chicago III  Purpose of Disbursement: Generic Party Printing  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHAR  13  SUBTOTAL of Allocated Federal ar FEDERAL SHAR  94  TOTAL This Period (last page for each of the state of the	96.43 le Initial) , Inc. S-1502 State L  32.95 and NonFederal Act RE + -0.15 each line only)(Federal NonFederal Act	Zip Code 60605- NONFEDERAL tivity This Page NONFEDERAL	Category/ Type  SHARE 500.16  SHARE 3536.78  NonFederal sha	Type of Allocated Activity:  X Administrative  Public Comm (ref to Allocated Activity or Ev  Date 1 0 2 Transaction ID: H401  TOTAL A  re to 21(a)(i))	Fundraising Exempt  Fundraising Exempt  Direct Candidate Support party only) by PAC ent Year-To-Date  468737.32  Direct Year-To-Date  468737.32  Direct Year-To-Date  468737.31  AMOUNT  633.11

PAGE	2	25 /	534	1
FOR	LINE	21a	OF	FORM 3X

I EBENAE/NOM EBE	IIIAL AGIIVII	•		FOR LII	NE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)					
Illinois Republican Party					
A Full Name /Least First M	Palatia Tarrett			I = of Aller and Aller and Aller	
A. Full Name (Last, First, M VoiceText.com	liddie initial)			Type of Allocated Activity:	
Mailing Address				Administrative Fundrais	9
211 East 7th Street	12th Floor			☐ Voter Drive ☐ Direct Ca	andidate Support
City	State	Zip Code		Public Comm (ref to party on	ıly) by PAC
Austin	TX	78701-		Allocated Activity or Event Year	r-To-Date
Purpose of Disbursement:			Category/		375.19
Telephone Service			Type		
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 0 2 1 Transaction ID: H401130.E24	2010
FEDERAL SI	HARE -	- NONFEDERAL	SHARE	= TOTAL AMOUN	
	190.80		717.75	90	08.55
B. Full Name (Last, First, M	liddle Initial)			Type of Allocated Activity:	
Huckaby Davis Lisker				Administrative  Fundrais	ing Exempt
Mailing Address				Voter Drive Direct Ca	andidate Support
228 South Washington					-  -  -  -
City	State	Zip Code		Public Comm (ref to party on	
Alexandria	VA	22314-		Allocated Activity or Event Year	-To-Date
Purpose of Disbursement: Cnslting:Accounting&Fl	EC NonEmployee		Category/ Type	4472	259.01
Activity or Event Identifier: ADMINISTRATION B 31				Date 1.0 2.1	2010
				Transaction ID: H401130.E24	4266
FEDERAL SI	HARE -	- NONFEDERAL	SHARE	= TOTAL AMOUN	Γ
	408.33		1536.09	194	14.42
C. Full Name (Last, First, M Clifton Gunderson LLP	liddle Initial)			Type of Allocated Activity:	
				Administrative L Fundrais	sing L Exempt
Mailing Address	0.4.400			Voter Drive Direct Ca	andidate Support
1301 W 22nd St City	Suite 1100 State	Zip Code	г	Public Comm (ref to party on	ılv) by PAC
Oak Brook	IL	60523-2006		Allocated Activity or Event Year	
Purpose of Disbursement:	12	00020 2000	Catagory	,	94.33
Accounting Services			Category/ Type		
Activity or Event Identifier: ADMINISTRATION B 31				Date 10 21	2010
ADMINISTRATION D 31				Transaction ID: H401130.E24	
FEDERAL SI	HARE +	- NONFEDERAL	SHARE	= TOTAL AMOUN	Γ
	3222.87	1	2124.13	1534	17.00
SUBTOTAL of Allocated Federa	al and NonFederal A	ctivity This Page			
FEDERAL SI	HARE -	- NONFEDERAL	SHARE	= TOTAL AMOUN	Γ
	3822.00	1	4377.97	18199	9.97
TOTAL This Period (last page	for each line only)(Ea	ideral share to 21/a\/i\ and	NonEederal shor	re to 21(a)(i))	
FEDERAL SI	• , ,	derai share to 21(a)(i) and NONFEDERA		TOTAL AMOUN	Т
i EDELIAE OI		140141 EDELLA	_ U	1 OTAL AMOUNT	

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FOR	LINE	21a	OF	FORM 3X	

NAME OF COMMITTEE (In Full)			FOR LINE 21a OF FORM 3X
Illinois Republican Party			
A. Full Name (Last, First, Middle Initial) Brien Sheahan  Mailing Address 5 St. Regis Court  City State  Elmhurst IL  Purpose of Disbursement: Legal Consulting  Activity or Event Identifier: ADMINISTRATION B 31	Zip Code 60126-	1 1 1 1	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 443057.28  Date 10 21 2010  Transaction ID: H401130.E24270  TOTAL AMOUNT
1098.83		4133.67	5232.50
B. Full Name (Last, First, Middle Initial) Brien Sheahan  Mailing Address 5 St. Regis Court  City State Elmhurst IL  Purpose of Disbursement: Travel Reimbursement	Zip Code 60126-	Category/ Type	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 443320.28
Activity or Event Identifier:		Гуре	M M / D D / Y Y Y Y
ADMINISTRATION B 31			Date 1 0 2 1 2 0 1 0  Transaction ID: H401130.E24271
FEDERAL SHARE 55.23	+ NONFEDERAL	SHARE 207.77	= TOTAL AMOUNT 263.00
C. Full Name (Last, First, Middle Initial) Brien Sheahan  Mailing Address			Type of Allocated Activity:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support
5 St. Regis Court		<del></del>	Public Comm (ref to party only) by PAC
City State Elmhurst IL	Zip Code 60126-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Paper,Pens,Storage Containers	00.20	Category/ Type	443466.64
Activity or Event Identifier: ADMINISTRATION B 31		1 1) 00	Date 1 0 2 1 2 0 1 0  Transaction ID: H401130.E24272
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
30.74		115.62	146.36
SUBTOTAL of Allocated Federal and NonFederal	Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
1184.80		4457.06	5641.86
TOTAL This Period (last page for each line only)( FEDERAL SHARE	Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT

PAGE	2	27 /	534		
FOR	LINE	212	OF	EOBM 3X	

I EBENAL/NOM EBE	, ,	•		FOR LINE 21a OF FORM 3
NAME OF COMMITTEE (In Full)				
Illinois Republican Party				
A. Full Name (Last, First, Mi	iddle Initial)			Type of Allocated Activity:
LHF Specialty Advertising	ng			X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
1106 North Stephens				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Springfield Purpose of Disbursement:	IL	62702-		Allocated Activity or Event Year-To-Date
Party Momentos			Category/ Type	445314.59
Activity or Event Identifier: ADMINISTRATION B 31			71	Date 1 0 2 1 2 0 1 0  Transaction ID: H401130.E24273
FEDERAL SH	HARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	197.27		742.13	939.40
B. Full Name (Last, First, Mi	iddle Initial)			Type of Allocated Activity:
Mack Communications				Administrative Fundraising Exempt
Mailing Address 1280 Iroquois Avenue	Suite 406			Voter Drive Direct Candidate Support
City	State 406	Zip Code		Public Comm (ref to party only) by PAC
Naperville	IL	60563-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Communications Cnslt.			Category/ Type	486977.87
Activity or Event Identifier: ADMINISTRATION B 31			Турс	Date 1.0 2.8 2.01.0
FEDERAL SH	HARE +	NONFEDERAL	SHARE	Transaction ID: H401130.E24297  = TOTAL AMOUNT
1 1 1 1 1	1 1 1 1	10.11.2521112	1 1 1 1	
	1050.00		3950.00	5000.00
C. Full Name (Last, First, Mi	iddle Initial)			Type of Allocated Activity:
Law Offices of John Fog	garty Jr.			Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
4043 N. Ravenswood	Suite 225			Public Comm (ref to party only) by PAC
Chicago	State IL	Zip Code 60613-		Allocated Activity or Event Year-To-Date
Chicago  Purpose of Disbursement:	IL	00013-		
Legal Fees			Category/ Type	481938.07
Activity or Event Identifier:				481938.07
				481938.07
Activity or Event Identifier:	IARE +	NONFEDERAL	Type	Date 1 0 2 8 2 0 1 0
Activity or Event Identifier: ADMINISTRATION B 31	HARE +	NONFEDERAL	Type	Date 1 0 2 8 2 0 1 0 Transaction ID: H401130.E24309
Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SH	1050.00		Type SHARE	Date 1 0 2 8 2 0 1 0  Transaction ID: H401130.E24309  = TOTAL AMOUNT
Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SH  SUBTOTAL of Allocated Federa	1050.00 al and NonFederal Ac	tivity This Page	SHARE 3950.00	Date 10 / 28 / 2010  Transaction ID: H401130.E24309  = TOTAL AMOUNT  5000.00
Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SH  SUBTOTAL of Allocated Federal FEDERAL SH	1050.00 al and NonFederal Ac	tivity This Page	SHARE 3950.00 SHARE	## TOTAL AMOUNT    AB1938.07   AB1938.07
Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SH  SUBTOTAL of Allocated Federal FEDERAL SH	1050.00 al and NonFederal Ac	tivity This Page	SHARE 3950.00	Date 10 / 28 / 2010  Transaction ID: H401130.E24309  = TOTAL AMOUNT  5000.00
Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SH  SUBTOTAL of Allocated Federa  FEDERAL SH  2  TOTAL This Period (last page f	al and NonFederal Action HARE + 2297.27 or each line only)(Fed	tivity This Page  NONFEDERAL  deral share to 21(a)(i) and	SHARE 3950.00 SHARE 8642.13 NonFederal shal	## TOTAL AMOUNT    Total Amount
Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SH  SUBTOTAL of Allocated Federal FEDERAL SH	al and NonFederal Action HARE + 2297.27 or each line only)(Fed	tivity This Page  NONFEDERAL	SHARE 3950.00 SHARE 8642.13 NonFederal shal	## TOTAL AMOUNT    Total Amount
Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SH  SUBTOTAL of Allocated Federa  FEDERAL SH  2  TOTAL This Period (last page f	al and NonFederal Action HARE + 2297.27 or each line only)(Fed	tivity This Page  NONFEDERAL  deral share to 21(a)(i) and	SHARE 3950.00 SHARE 8642.13 NonFederal shal	## TOTAL AMOUNT    Total Amount

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FOR	LINE	21a	OF	FORM 3X

			FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
A. Full Name (Last, First, Middle Initial) Advantage Payroll Services			Type of Allocated Activity:
			Administrative Fundraising Exempt
Mailing Address 1000 E Warrenville Rd			Voter Drive Direct Candidate Support
	ip Code		Public Comm (ref to party only) by PAC
•	0563-1867		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Payroll Service Fee		Category/ Type	481977.87
Activity or Event Identifier: ADMINISTRATION B 31		. , , , , ,	Date 1 0 2 8 2 0 1 0 Transaction ID: H401130.E24361
FEDERAL SHARE +	NONFEDERAL S	SHARE	= TOTAL AMOUNT
8.36		31.44	39.80
<b>B.</b> Full Name (Last, First, Middle Initial) 205 Randolph Investors, LLC			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address 205 W. Randolph			Voter Drive Direct Candidate Support
•	ip Code		Public Comm (ref to party only) by PAC
<u>_</u>	0606-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Rent		Category/ Type	493502.76
Activity or Event Identifier: ADMINISTRATION B 31			Date 1 0 2 9 2 0 1 0 Transaction ID: H401130.E24363
FEDERAL SHARE +	NONFEDERAL S	SHARE	= TOTAL AMOUNT
1034.23		3890.66	4924.89
C. Full Name (Last, First, Middle Initial) 415 Property Mgmt			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
415 West State Street 104			
•	ip Code		Public Comm (ref to party only) by PAC
	0134-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Rent		Category/ Type	494042.76
Activity or Event Identifier: ADMINISTRATION B 31		71	Date 1 0 2 9 2 0 1 0 Transaction ID: H401130.E24365
FEDERAL SHARE +	NONFEDERAL S	SHARE	= TOTAL AMOUNT
		1 1 1 1	
113.40		426.60	540.00
SUBTOTAL of Allocated Federal and NonFederal Activity	/ This Page		
FEDERAL SHARE +	NONFEDERAL S	SHARE	= TOTAL AMOUNT
1155.99		1348.70	5504.69
TOTAL This Period (last page for each line only)(Federa FEDERAL SHARE	l share to 21(a)(i) and l NONFEDERAL		re to 21(a)(i))  TOTAL AMOUNT

F	PAGE	2	29 / 53		4	
	FOR	LINE	212	OF	FORM 3X	

NAME OF COMMITTEE (In Full)			FOR LINE 21a OF FORM 3X
Illinois Republican Party			
A. Full Name (Last, First, Middle Initi	al)		Type of Allocated Activity:
Vista Realty, Inc.			Administrative Fundraising Exempt
Mailing Address 220 W. Carpenter St.			☐ Voter Drive ☐ Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Springfield IL	62702-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Rent		Category/ Type	488577.87
Activity or Event Identifier: ADMINISTRATION B 31		<u>, , , , , , , , , , , , , , , , , , , </u>	Date 1 0 2 9 2 0 1 0 Transaction ID: H401130.E24366
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
336.00		1264.00	1600.00
<b>B.</b> Full Name (Last, First, Middle Initi Steve Ettinger	al)		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address 1548 W Capitol Ave			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Springfield IL	62704-1514		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Travel Reimbursement		Category/ Type	496477.37
Activity or Event Identifier: ADMINISTRATION B 31			Date 1.1 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
16.52	2	62.14	78.66
C. Full Name (Last, First, Middle Initi Megan Piazza	al)		Type of Allocated Activity:
C. Full Name (Last, First, Middle Initi	ial)		X Administrative Fundraising Exempt
C. Full Name (Last, First, Middle Initi Megan Piazza Mailing Address 1236 Lake Avenue			X Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C. Full Name (Last, First, Middle Initi Megan Piazza Mailing Address 1236 Lake Avenue City State	Zip Code		X Administrative ☐ Fundraising ☐ Exempt ☐ Voter Drive ☐ Direct Candidate Support ☐ Public Comm (ref to party only) by PAC
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State  Wilmette IL  Purpose of Disbursement:		Category/	X Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State Wilmette IL  Purpose of Disbursement: Travel Reimbursement	Zip Code	Category/ Type	X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496541.00
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State  Wilmette IL  Purpose of Disbursement:	Zip Code		X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496541.00  Date 1 1 1 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31	Zip Code 60091 -	Type	X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496541.00  Date 1 1 D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State  Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE	Zip Code 60091 - + NONFEDERAL	Type SHARE	X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496541.00  Date 1 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31	Zip Code 60091 - + NONFEDERAL	Type	X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496541.00  Date 1 1 D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State  Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE	Zip Code 60091 - + NONFEDERAL	Type SHARE	X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496541.00  Date 1 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE  13.36	Zip Code 60091 - + NONFEDERAL	SHARE 50.27	X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496541.00  Date 1 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE  13.36  SUBTOTAL of Allocated Federal and No	Zip Code 60091-  + NONFEDERAL 6  onFederal Activity This Page + NONFEDERAL	SHARE 50.27	X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496541.00  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24378  = TOTAL AMOUNT  63.63
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE  13.36  SUBTOTAL of Allocated Federal and No FEDERAL SHARE  365.88	Zip Code 60091-  + NONFEDERAL  onFederal Activity This Page + NONFEDERAL  line only)(Federal share to 21(a)(i) and	SHARE 50.27 SHARE 1376.41 NonFederal sha	X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496541.00  Date 1 1 1 2 0 1 0  Transaction ID: H401130.E24378  = TOTAL AMOUNT 63.63  TOTAL AMOUNT 1742.29  re to 21(a)(i))
C. Full Name (Last, First, Middle Initi Megan Piazza  Mailing Address 1236 Lake Avenue  City State Wilmette IL  Purpose of Disbursement: Travel Reimbursement  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE  13.36  SUBTOTAL of Allocated Federal and No FEDERAL SHARE  365.88	Zip Code 60091-  + NONFEDERAL 6  onFederal Activity This Page + NONFEDERAL	SHARE 50.27 SHARE 1376.41 NonFederal sha	X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496541.00  Date 1 1 2 0 1 0  Transaction ID: H401130.E24378  = TOTAL AMOUNT 63.63

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FOR	LINE	21a	OF	FORM 3X

				FOR LINE 21a OF FORM 3X
NAME OF COMMIITTEE (In Full)				
Illinois Republican Party				
A Full Name /Last First Middle	o Initial)			Time of Allegated Activity
A. Full Name (Last, First, Middle City Water Light & Power	e miliai)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				
Municipal Center West				Voter Drive Direct Candidate Support
	State	Zip Code		Public Comm (ref to party only) by PAC
Springfield II		62757-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:			Catagory	496398.71
Utilities			Category/ Type	430030.71
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 1 D D / Y Y Y Y Y Y
ADMINISTRATION B 31				Transaction ID: H401130.E24379
FEDERAL SHAR	E +	NONFEDERAL:	SHARE	= TOTAL AMOUNT
1/	19.52		1691.04	2140.56
4	19.52		1091.04	2140.30
B. Full Name (Last, First, Middle	 e Initial\			Type of Allocated Activity:
AT&T	o miliai)			X Administrative Fundraising Exempt
Mailing Address				
Bill Payment Center				Voter Drive Direct Candidate Support
	state	Zip Code		Public Comm (ref to party only) by PAC
Saginaw N	ΛI	48663-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:			Category/	494258.15
Telephone Service			Type	
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 1 1 1 1 2 0 1 0
ADMINISTRATION B 31				Transaction ID: H401130.E24380
FEDERAL SHAR	E +	NONFEDERAL:	SHARE	= TOTAL AMOUNT
	15.23		170.16	215.39
	10.20		170.10	210.00
C. Full Name (Last, First, Middle	 e Initial)			Type of Allocated Activity:
Mack Communications	o milaly			X Administrative ☐ Fundraising ☐ Exempt
Mailing Address				1 — · · · · · · · · · · · · · · · · · ·
1280 Iroquois Avenue	Suite 406			Voter Drive Direct Candidate Support
City	state	Zip Code		Public Comm (ref to party only) by PAC
Naperville II		60563-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:			Category/	500552.69
Travel Reimbursement			Type	
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 1 1 5 2 0 1 0
ADMINIOTRATION DOT				Transaction ID: H401130.E24383
FEDERAL SHAR	E +	NONFEDERAL	SHARE	= TOTAL AMOUNT
	5.38		20.26	25.64
	-100			
SUBTOTAL of Allocated Federal ar	nd NonFederal Acti	vity This Page		
		,	OLIADE	TOTAL AMOUNT
FEDERAL SHAR		NONFEDERAL :		= TOTAL AMOUNT
50	0.13		1881.46	2381.59
TOTAL This Period (last page for e	each line only)(Fed	eral share to 21(a)(i) and	NonFederal sha	re to 21(a)(i))
FEDERAL SHAR	• , , ,	NONFEDERA		TOTAL AMOUNT

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	FOR	LINE	21a	OF	FORM 3X	

			FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
A. Full Name (Last, First, Middle Initia			Type of Allocated Activity:
Advantage Payroll Services	''		X Administrative Fundraising Exempt
Mailing Address			1
1000 E Warrenville Rd			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Naperville IL	60563-1867		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Payroll Service Fee		Category/ Type	500527.05
Activity or Event Identifier: ADMINISTRATION B 31		1 1/1/2	Date 1 1 1 1 5 2 0 1 0 Transaction ID: H401130.E24391
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
6.38		24.02	30.40
<b>B.</b> Full Name (Last, First, Middle Initia Lake Area Disposal Services	l)		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			
2106 E. Cornell			
City State	Zip Code		Public Comm (ref to party only) by PAC
Springfield IL	62703-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Waste Disposal		Category/ Type	496575.56
Activity or Event Identifier: ADMINISTRATION B 31			Date 1.1 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
18.48		69.52	88.00
C. Full Name (Last, First, Middle Initia Sams Club			Type of Allocated Activity:
Mailing Address			Administrative Fundraising Exempt
P.O. Box 660617, Dept. 49			☐ Voter Drive ☐ Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Dallas TX	75266-0617		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Office Supplies		Category/ Type	496903.18
Activity or Event Identifier:		Турс	M M / D D / Y Y Y
ADMIŃISTRATION B 31			Date 1 1 1 5 2 0 1 0 Transaction ID: H401130.E24396
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
		1 1 1 1	
21.00		79.00	100.00
SUBTOTAL of Allocated Federal and Non	Federal Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
45.86		172.54	218.40
TOTAL This Period (last page for each lin	3,7,7		. , , , ,
FEDERAL SHARE	NONFEDERA	L SHARE	TOTAL AMOUNT

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	FOR	LINE	212	OF	FORM 3X

				FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)	)			
Illinois Republican Party				
A. Full Name (Last, First, N	Middle Initial)			Type of Allocated Activity:
AT&T				Administrative Fundraising Exempt
Mailing Address Bill Payment Center				☐ Voter Drive ☐ Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Saginaw	MI	48663-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Telephone Service			Category/ Type	496803.18
Activity or Event Identifier: ADMINISTRATION B 31			1 1960	Date 1 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24397
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	46.46		174.80	221.26
<b>B.</b> Full Name (Last, First, Market) Puritan Springs Water				Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
1709 North Kickapoo		7: 0 :		Public Comm (ref to party only) by PAC
City Lincoln	State IL	Zip Code 62656-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:		02030-	0.11/	
Bottled Water			Category/ Type	496581.92
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 1 1 1 5 2 0 1 0 Transaction ID: H401130.E24398
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	1.34		5.02	6.36
C. Full Name (Last, First, M Comcast Cable	Middle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
P.O. Box 3001				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Southeastern Purpose of Disbursement:	PA	19398-		Allocated Activity or Event Year-To-Date
Cable Television			Category/ Type	499875.49
Activity or Event Identifier:			Турс	Deta M M / D D / Y Y Y Y
ADMINISTRATION B 31				Date 1 1 1 5 2 0 1 0 Transaction ID: H401130.E24399
FEDERAL S	SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	43.66		164.24	207.90
SUBTOTAL of Allocated Feder	ral and NonFedera	I Activity This Page		
FEDERAL S		+ NONFEDERAL	SHARE	= TOTAL AMOUNT
I EDETIAL C	91.46	1 NON EDETAL	344.06	435.52
	31.40		J <del>44</del> .00	400.02
TOTAL This Period (last page FEDERAL S	• •	(Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i)) TOTAL AMOUNT
I EDETIAL C		NOM EDEM	0. // 4 (_	. STAL AMOUNT

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FOR	LINE	212	OF	FORM 3X

I EBERAE/NOMI EBERAE AOTA			FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
A. Full Name (Last, First, Middle Initial) Coffee Unlimited			Type of Allocated Activity:
			Administrative Fundraising Exempt
Mailing Address 1408 South Clinton, #1701			Voter Drive Direct Candidate Support
City State	Zip Code		Public Comm (ref to party only) by PAC
Chicago IL	60601-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Office Supplies		Category/ Type	499111.13
Activity or Event Identifier: ADMINISTRATION B 31		, .,,,,,,	Date 1 1 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
2.26		8.49	10.75
<b>B.</b> Full Name (Last, First, Middle Initial) Hanson Information Systems			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
2433 West White Oaks Dr.	7'- 0-1-	1	Public Comm (ref to party only) by PAC
City State Springfield IL	Zip Code 62704-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:	02704	Ostonom/	499667.59
Internet Access		Category/ Type	499007.39
Activity or Event Identifier: ADMINISTRATION B 31			Date 1.1 1 5 2 0 1 0  Transaction ID: H401130.E24401
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
69.55		261.66	331.21
C. Full Name (Last, First, Middle Initial) Commonwealth Edison			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
P.O. Box 6111			I — '''
City State	Zip Code		Public Comm (ref to party only) by PAC
Carol Stream IL  Purpose of Disbursement:	60197-		Allocated Activity or Event Year-To-Date
Utilities		Category/ Type	498956.40
Activity or Event Identifier:		. ,,,,,,	Date 1 1 1 5 2 0 1 0
ADMIŃISTRATION B 31			Transaction ID: H401130.E24402
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
84.95		319.56	404.51
SUBTOTAL of Allocated Federal and NonFedera	al Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
156.76	. ITOM EBETIAL	589.71	746.47
TOTAL This Period (last page for each line only			
FEDERAL SHARE	NONFEDERA	L SHARE	TOTAL AMOUNT
1			

PAGE	2	34 /	534	4
FOR	LINE	21a	OF	FORM 3X

				FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In F	(الد			
Illinois Republican Party	,			
A. Full Name (Last, First	, Middle Initial)			Type of Allocated Activity:
Comcast Cable				Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
P.O. Box 3001				
City	State	Zip Code		Public Comm (ref to party only) by PAC
Southeastern	PA	19398-		Allocated Activity or Event Year-To-Date
Purpose of Disbursemer Cable Television	nt:		Category/ Type	500094.22
Activity or Event Identifie ADMINISTRATION B 3	r: I			Date 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24403
FEDERAL	. SHARE	+ NONFEDERAL	. SHARE	= TOTAL AMOUNT
	45.93		172.80	218.73
B. Full Name (Last, First	, Middle Initial)			Type of Allocated Activity:
Comcast Cable				Administrative Fundraising Exempt
Mailing Address P.O. Box 3001				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Southeastern	PA	19398-		Allocated Activity or Event Year-To-Date
Purpose of Disbursemer Cable Television	nt:		Category/ Type	500209.12
Activity or Event Identifie ADMINISTRATION B 3	r: 1		71	Date 1 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24404
FEDERAL	SHARE	+ NONFEDERAL	. SHARE	= TOTAL AMOUNT
	24.13		90.77	114.90
C. Full Name (Last, First United Parcel Service	, Middle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				1
Lockbox 577				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Carol Stream	IL	60132-		Allocated Activity or Event Year-To-Date
Purpose of Disbursemer Parcel Delivery	nt:		Category/ Type	496487.56
Activity or Event Identifie ADMINISTRATION B 3	r: 1		Турс	Date 1.1 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
				Transaction ID: H401130.E24405
FEDERAL	SHARE	+ NONFEDERAL	. SHARE	= TOTAL AMOUNT
	15.01		56.45	71.46
SUBTOTAL of Allocated Fed	deral and NonFeder	ral Activity This Page		
FEDERAL		+ NONFEDERAL	SHARE	= TOTAL AMOUNT
FEDERAL		i NONFEDERAL	1 1 1 1	
	85.07		320.02	405.09
TOTAL This Period (last page FEDERAL		y)(Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT

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FOR	LINE	21a	OF	FORM 3X

NAME OF COMMITTEE (In Full)			FOR LINE 21a OF FORM 3X
Illinois Republican Party			
A. Full Name (Last, First, Middle Ir US Bank  Mailing Address P.O. Box 790448  City State Saint Louis MO  Purpose of Disbursement: Copier/Scanner Lease  Activity or Event Identifier: ADMINISTRATION B 31	e Zip Code	Category/ Type	Type of Allocated Activity:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  500876.22  Date M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
67.	94	255.59	323.53
B. Full Name (Last, First, Middle In Coffee Unlimited  Mailing Address 1408 South Clinton, #1701  City State			Type of Allocated Activity:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC
Chicago IL	60601-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Office Supplies		Category/ Type	499149.38
Activity or Event Identifier: ADMINISTRATION B 31		71	Date 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24407
FEDERAL SHARE	+ NONFEDERAL S	30.22	= TOTAL AMOUNT 38.25
C. Full Name (Last, First, Middle In Staples	nitial)		Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address P.O. Box 689020			Voter Drive Direct Candidate Support
City State		1 1	Public Comm (ref to party only) by PAC
Des Moines IA	50368-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Office Supplies		Category/ Type	498190.18
Activity or Event Identifier: ADMINISTRATION B 31			Date 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24408
FEDERAL SHARE	+ NONFEDERAL S	SHARE	= TOTAL AMOUNT
13.	02	48.98	62.00
SUBTOTAL of Allocated Federal and N	NonFederal Activity This Page		
FEDERAL SHARE	+ NONFEDERAL S	SHARE	= TOTAL AMOUNT
88.9	39	334.79	423.78
TOTAL This Period (last page for each FEDERAL SHARE	h line only)(Federal share to 21(a)(i) and NONFEDERAL		e to 21(a)(i))  TOTAL AMOUNT

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FOR	LINE	21a	OF	FORM 3X

				FOI	R LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)					
Illinois Republican Party					
A. Full Name (Last, First, Mic Ameren Illinois	Idle Initial)			Type of Allocated Activity:	draising Exempt
Mailing Address					,
P.O. Box 66884				Voter Drive Direct	ct Candidate Support
City	State	Zip Code		Public Comm (ref to part	ty only) by PAC
Saint Louis	МО	63166-		Allocated Activity or Event	Year-To-Date
Purpose of Disbursement: Utilities			Category/ Type		00986.46
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 1 1 5 Transaction ID: H401130	2 0 1 0 ° 2.E24409
FEDERAL SHA	ARE +	NONFEDERAL S	SHARE	= TOTAL AMO	
	23.15		87.09		110.24
<b>B.</b> Full Name (Last, First, Mic Illinois Labor Law Poster	ldle Initial) Service			Type of Allocated Activity:  X Administrative Fund	draising Exempt
Mailing Address 1337 Wabash Avenue	Ste. B				ct Candidate Support
City	State	Zip Code		Public Comm (ref to part	ty only) by PAC
Springfield	IL	62704-		Allocated Activity or Event	Year-To-Date
Purpose of Disbursement: Federal & State Labor La	w Posters		Category/ Type	5	01053.71
Activity or Event Identifier: ADMINISTRATION B 31			-	Date 1 1 1 5 Transaction ID: H401130	2 0 1 0 2 2 4410
FEDERAL SH	ARE +	NONFEDERALS	SHARE	= TOTAL AMO	
	14.12		53.13		67.25
C. Full Name (Last, First, Mic DirectTV	Idle Initial)			Type of Allocated Activity:  Administrative Fund	draising Exempt
Mailing Address					ct Candidate Support
P.O. Box 60036					
City	State	Zip Code		Public Comm (ref to part	, .
Los Angeles Purpose of Disbursement:	CA	90060-		Allocated Activity or Event	
Cable Television			Category/ Type	4	99100.38
Activity or Event Identifier: ADMINISTRATION B 31				Date 1 1 1 5 Transaction ID: H401130	2010
FEDERAL SH	ARE +	NONFEDERALS	SHARE	= TOTAL AMO	
	30.24		113.74		143.98
SUBTOTAL of Allocated Federal	and NonFederal Ac	,			
FEDERAL SHA		NONFEDERAL S	1 1 1 1	= TOTAL AMO	
	67.51		253.96		321.47
TOTAL This Period (last page for FEDERAL SHA		deral share to 21(a)(i) and NONFEDERAL		re to 21(a)(i)) TOTAL AMO	DUNT
. 222				1.5.1.127400	

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FOR	LINE	212	OF	FORM 3X

		• • •		FOR LINE 21a OF FORM 3>
NAME OF COMMITTEE (In Full)				
Illinois Republican Party				
A. Full Name (Last, First, M	liddle Initial)			Type of Allocated Activity:
Watts Copy System				Administrative Fundraising Exempt
Mailing Address 2860 Stanton Avenue				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Springfield	IL	62708-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Copier Lease			Category/ Type	499336.38
Activity or Event Identifier: ADMINISTRATION B 31			, ,,	Date 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24412
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	39.27		147.73	187.00
<b>B.</b> Full Name (Last, First, M Comcast Cable	liddle Initial)			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address				
P.O. Box 3001				Voter Drive Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Southeastern	PA	19398-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Cable Television			Category/ Type	500217.12
Activity or Event Identifier: ADMINISTRATION B 31				Date 11 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL S	HARE	+ NONFEDERAL	SHARE	Transaction ID: H401130.E24413  = TOTAL AMOUNT
T EBETWE O	1 1 1 1	THOM EBETOLE	1 1 1 1	
	1.68		6.32	8.00
C. Full Name (Last, First, M Ameren Cilco	liddle Initial)			Type of Allocated Activity:
Mailing Address				Administrative Fundraising Exempt
P.O. Box 66826				☐ Voter Drive ☐ Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Saint Louis	MO	63166-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: Utilities			Category/ Type	500496.65
Activity or Event Identifier:			1 1 1 1 1 1	M M / D D / Y Y Y Y
ADMINISTRATION B 31				Date 1 1 1 5 2 0 1 0 Transaction ID: H401130.E24414
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	1 1 1 1		1 1 1 1	
	34.99		131.64	166.63
SUBTOTAL of Allocated Feder	al and NonFederal	Activity This Page		
FEDERAL S	HARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	75.94		285.69	361.63
TOTAL This Period (last page				
FEDERAL S	NAKE	NONFEDERA	IL SHAKE	TOTAL AMOUNT
	1 1 1 1			

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FOR	LINE	21a	OF	FORM 3X

I EBEITAE/HONI EBEITAE AO			FOR LINE 21a OF FORM 3X
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
A. Full Name (Last, First, Middle Initial)			Type of Allocated Activity:
The Party Tree Rental, Inc.			Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
3233 Mathers Rd City State	Zip Code		Public Comm (ref to party only) by PAC
Springfield IL	62711-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement: St. Fair Equip Rental No Fed. Can	d.	Category/	498551.89
Activity or Event Identifier: ADMINISTRATION B 31		Туре	Date 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24415
FEDERAL SHARE	+ NONFEDERAL	SHARE	Transaction ID: H401130.E24415  = TOTAL AMOUNT
75.96		285.75	361.71
<b>B.</b> Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
205 Pennsylvania Ave., SE City State	7in Codo	T	Public Comm (ref to party only) by PAC
City State Washington DC	Zip Code 20003-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:	20000	Catagory	497478.18
Computer Software		Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 31			Date 1 1 1 5 2 0 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
120.75		454.25	575.00
C. Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity:  X Administrative Fundraising Exempt
Mailing Address			Voter Drive Direct Candidate Support
205 Pennsylvania Ave., SE	71.0.1	1	Public Comm (ref to party only) by PAC
City State Washington DC	Zip Code 20003-		Allocated Activity or Event Year-To-Date
Purpose of Disbursement:	20003-	Catagory	498053.18
Computer Software		Category/ Type	
Activity or Event Identifier: ADMINISTRATION B 31			Date 1.1 1.5 2.010
			Transaction ID: H401130.E24418
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
120.75		454.25	575.00
SUBTOTAL of Allocated Federal and NonFe	deral Activity This Page		
FEDERAL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
317.46		1194.25	1511.71
` · · ·			
TOTAL This Period (last page for each line FEDERAL SHARE	only)(Federal share to 21(a)(i) and NONFEDERA		re to 21(a)(i))  TOTAL AMOUNT
, . <del>.</del>			

PAGE	2	39 /	534	4
FOR	LINE	21a	OF	FORM 3X

			FOR LINE 21a OF FORM 3X	
NAME OF COMMITTEE (In Full)				
Illinois Republican Party				
A Full Name (Last First Middle Initial)			True of Allegated Assistant	
A. Full Name (Last, First, Middle Initial) Aristotle International			Type of Allocated Activity:    X   Administrative   Fundraising   Exempt	
Mailing Address			The straight of the straight o	
205 Pennsylvania Ave., SE			Voter Drive Direct Candidate Support	
City State	Zip Code		Public Comm (ref to party only) by PAC	
Washington DC	20003-		Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Computer Software		Category/	498128.18	
Activity or Event Identifier: ADMINISTRATION B 31		Type	Date 1 1 1 5 2 0 1 0  Transaction ID: H401130.E24419	
FEDERAL SHARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT	
15.75		59.25	75.00	
B. Full Name (Last, First, Middle Initial) Comcast Cable			Type of Allocated Activity:  X Administrative Fundraising Exempt	
Mailing Address			Tariminot date and a series and	
P.O. Box 3001			Voter Drive Direct Candidate Support	
City State	Zip Code		Public Comm (ref to party only) by PAC	
Southeastern PA	19398-	11 1	Allocated Activity or Event Year-To-Date	
Purpose of Disbursement: Cable Television		Category/ Type	500330.02	
Activity or Event Identifier: ADMINISTRATION B 31		1 .7/5	Date 1 1 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
			Transaction ib. 11401130.L24420	
FEDERAL SHARE +	NONFEDERAL	SHARE	= TOTAL AMOUNT	
FEDERAL SHARE +	NONFEDERAL	SHARE 89.19	= TOTAL AMOUNT 112.90	
C. Full Name (Last, First, Middle Initial)	NONFEDERAL	1 1 1 1		
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance	NONFEDERAL	1 1 1 1	112.90	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance Mailing Address	NONFEDERAL	1 1 1 1	Type of Allocated Activity:	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance Mailing Address 188 Industrial Dr., Ste. 430		1 1 1 1	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance Mailing Address 188 Industrial Dr., Ste. 430 City State	Zip Code	1 1 1 1	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement:		89.19	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430 City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage	Zip Code	1 1 1 1	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier:	Zip Code	89.19  Category/	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10  Date 1 1 1 2 2 0 1 0	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430 City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage	Zip Code 60126-	89.19  Category/ Type	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier:	Zip Code	89.19  Category/ Type	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10  Date 1 1 1 2 2 0 1 0	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier: ADMINISTRATION B 31	Zip Code 60126-	89.19  Category/ Type	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24579	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE +  -26.23	Zip Code 60126-	89.19  Category/ Type  SHARE	Type of Allocated Activity:  X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496416.10  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24579  = TOTAL AMOUNT	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430 City State Elmhurst IL Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE +	Zip Code 60126-	Category/ Type  SHARE -98.67	Type of Allocated Activity:  X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496416.10  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24579  = TOTAL AMOUNT	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address  188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE +  -26.23  SUBTOTAL of Allocated Federal and NonFederal Activity of Allocated Federal	Zip Code 60126- NONFEDERAL tivity This Page	Category/ Type  SHARE -98.67	Type of Allocated Activity:  X Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  496416.10  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24579  = TOTAL AMOUNT  -124.90	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE + -26.23  SUBTOTAL of Allocated Federal and NonFederal Act FEDERAL SHARE + 13.23  TOTAL This Period (last page for each line only)(Fed	Zip Code 60126-  NONFEDERAL  tivity This Page  NONFEDERAL  deral share to 21(a)(i) and	Category/ Type  SHARE -98.67  SHARE 49.77  NonFederal sha	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24579  = TOTAL AMOUNT -124.90  Te to 21(a)(i))	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE +  -26.23  SUBTOTAL of Allocated Federal and NonFederal Act FEDERAL SHARE +  13.23  TOTAL This Period (last page for each line only)(Federal SHARE)	Zip Code 60126- NONFEDERAL tivity This Page NONFEDERAL	Category/ Type  SHARE -98.67  SHARE 49.77  NonFederal sha	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24579  = TOTAL AMOUNT -124.90  TOTAL AMOUNT 63.00	
C. Full Name (Last, First, Middle Initial) West Bend Mutual Insurance  Mailing Address 188 Industrial Dr., Ste. 430  City State Elmhurst IL  Purpose of Disbursement: Reimb: Insurance Policy Coverage  Activity or Event Identifier: ADMINISTRATION B 31  FEDERAL SHARE + -26.23  SUBTOTAL of Allocated Federal and NonFederal Act FEDERAL SHARE + 13.23  TOTAL This Period (last page for each line only)(Fed	Zip Code 60126-  NONFEDERAL  tivity This Page  NONFEDERAL  deral share to 21(a)(i) and	Category/ Type  SHARE -98.67  SHARE 49.77  NonFederal sha	Type of Allocated Activity:  X Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 496416.10  Date 1 1 2 2 0 1 0  Transaction ID: H401130.E24579  = TOTAL AMOUNT -124.90  Te to 21(a)(i))	

#### SCHEDULE L-A (FEC Form 3X)

Use separate schedule(s)

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	LEVIN FUNDS	for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)
ny information copied from such Report for commercial purposes, other than us	s and Statements may not b sing the name and address o	e sold or used by any person of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Illinois Republican Party			
Full Name (Last, First, Middle Initial)			Transaction ID:SLC322863
Fund for American			Date of Receipt
Mailing Address P.O. Box 6579	6		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Amount of Each Receipt this Period
Washington	DC	20035-	5000.00
Name of Employer or Principal Place of Information Requested	of Business		Aggregate Year-to-Date
Occupation			5000.00
Information Requested			Account: LEVIN
Full Name (Last, First, Middle Initial)			Transaction ID:SL01130.C321787
Dot Foods Inc.			Date of Receipt
Mailing Address 1 Dot Way PO Box 192			1 0 1 8 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Amount of Each Receipt this Period
Mt. Sterling	ĪL	62353-	10000.00
Name of Employer or Principal Place	of Business		Aggregate Year-to-Date
Information Requested Occupation			10000.00
Information Requested			Account: LEVIN
Full Name (Last, First, Middle Initial)			Transaction ID:SLC322862
Riverstone Group, Inc			Date of Receipt
Mailing Address 1701 5th Aven	ue		11 01 2010
City	State	Zip Code	Amount of Each Receipt this Period
Moline	IL	61265-	5000.00
Name of Employer or Principal Place	of Business		Aggregate Year-to-Date
Information Requested Occupation			5000.00
Information Requested			Account: LEVIN
Full Name (Last, First, Middle Initial)			Transaction ID:SLC321788
Koch Industries Inc.			Date of Receipt  M M / D D / Y Y Y Y
Mailing Address 4111 E. 37th S	t N		10 15 2010
City	State	Zip Code	Amount of Each Receipt this Period
Wichita	KS	67220-	10000.00
Name of Employer or Principal Place	of Business		Aggregate Year-to-Date
Information Requested Occupation			10000.00
Information Requested			Account: LEVIN
· · ·			30000.00

#### SCHEDULE L-A (FEC Form 3X)

Use separate schedule(s) for each category of the Aggregation Page

	PAGE	241 / 534	
FOR LINE NUMBER (check only one)	: X 1a	2	

ITEMIZED RECEIPTS OF LEVIN FUNDS Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Illinois Republican Party Full Name (Last, First, Middle Initial) Transaction ID:SL01202.C323094 A. Allergan Usa Inc. Date of Receipt 22 2010 Mailing Address 2525 DuPont Drive Amount of Each Receipt this Period City Zip Code State 5000.00 Irvine CA 92612-Name of Employer or Principal Place of Business Aggregate Year-to-Date Information Requested 5000.00 Occupation Account: LEVIN Information Requested Full Name (Last, First, Middle Initial) Transaction ID:SLC322040 В. IL State Chamber Of Commerce Date of Receipt 2010 Mailing Address 215 E. Adams St Amount of Each Receipt this Period Citv Zip Code State 10000.00 Springfield IL 62701-Name of Employer or Principal Place of Business Aggregate Year-to-Date Information Requested 10000.00 Occupation Account: LEVIN Information Requested Full Name (Last, First, Middle Initial) Transaction ID:SLC321796 C. Davita Total Renal Care Inc Date of Receipt D Mailing Address PO Box 2037 Amount of Each Receipt this Period City State Zip Code

WA

SUBTOTAL of Receipts This Page (optional)	20000.00
TOTAL This Period (last page this line number only)	50000.00

98401-

5000.00

5000.00

Aggregate Year-to-Date

Account: LEVIN

Tacoma

Occupation

Information Requested

Information Requested

Name of Employer or Principal Place of Business

	POLICIAL DA (CEO Como OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 242 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS		Aggregation age	4b 4d 5
	ny Information copied from such Reports and State r for commercial purposes, other than using the nar			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Orgar The Northern Trust Company	nization Na	me	Transaction ID: 4B01130.E24581 Date of Disbursement
	Mailing Address 50 S La Salle St			10 M / D D / Y Y Y Y Y
	City Chicago	State IL	Zip Code 60603-1006	Amount of Each Disbursement this Period 22.00
	Purpose of Disbursement		00000 1000	Account: LEVIN
_	Service Fee			Account. LEVIIV
В.	Full Name (Last, First, Middle Initial) / Full Orgar Amanda Wears	nization Na	me	Transaction ID: 4B01130.E24655 Date of Disbursement
	Mailing Address 2008 W. Warner Avenue	е		111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60618-3910	186.19
	Purpose of Disbursement			Account: LEVIN
_	FEA Travel Exp. Reimbursement			
C.	Full Name (Last, First, Middle Initial) / Full Orgar Illinois Republican Party	nization Na	me	Transaction ID: 4B01130.E24660 Date of Disbursement
	Mailing Address LEVIN ACCOUNT 205 W. Randolph Street	t, #1245		10 15 / 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60606	5000.00
	Purpose of Disbursement ACA PAC Dep. In Wrong Acct.			Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Orgar Steve Ettinger	nization Na	me	Transaction ID: 4B01130.E24649 Date of Disbursement
	Mailing Address 1548 W Capitol Ave			111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Springfield	IL	62704-1514	295.90
	Purpose of Disbursement FEA Travel Exp. Reimbursement			Account: LEVIN
<u> —</u> Е.	Full Name (Last, First, Middle Initial) / Full Orgar Nancy Perlman	nization Na	me	Transaction ID: 4B01130.E24593 Date of Disbursement
	Mailing Address 3847 N Whipple St			111
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60618-3521	50.00
	Purpose of Disbursement			Account: LEVIN
_	Poll Watcher GOTV Stipend			
	SUBTOTAL of Disbursements This Page (optional	)		5554.09

FE6AN026

ıııaç	Je# 11990320930			
П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a 4c 4c 4d 4d 4d
	ny Information copied from such Reports and State for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Megan Piazza	nization Na	ame	Transaction ID: 4B01130.E24650 Date of Disbursement
	Mailing Address 1236 Lake Avenue			111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Wilmette	State IL	Zip Code 60091	Amount of Each Disbursement this Period 239.35
	Purpose of Disbursement FEA Travel Exp. Reimbursement			Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organ Tyler Sidell	nization Na	ame	Transaction ID: 4B01130.E24652 Date of Disbursement
	Mailing Address 109 Kay Ct			111 / 11 / 2010
	City East Peoria	State IL	Zip Code 61611-4511	Amount of Each Disbursement this Period 312.61
	Purpose of Disbursement FEA Travel Exp. Reimbursement			Account: LEVIN
c.	Full Name (Last, First, Middle Initial) / Full Organ	nization Na	ame	Transaction ID: 4B01130.E24648 Date of Disbursement
	Mailing Address 101 E Main Cross St			111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Taylorville	State IL	Zip Code 62568-2225	Amount of Each Disbursement this Period 2706.63
	Purpose of Disbursement GOTV Poll Watcher Booklets			Account: LEVIN
 D.	Full Name (Last, First, Middle Initial) / Full Organ Mack Communications	nization Na	ame	Transaction ID: 4B01130.E24651 Date of Disbursement
	Mailing Address 1280 Iroquois Avenue Suite 406			11
	City Naperville	State IL	Zip Code 60563	Amount of Each Disbursement this Period 96.44
	Purpose of Disbursement FEA Travel Exp. Reimbursement	<u> </u>	00000	Account: LEVIN
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organ	nization Na	ame	Transaction ID: 4B01130.E24587 Date of Disbursement
	Kurt Fujio Mailing Address 1810 W. Touhy			11
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago Purpose of Disbursement	IL	60626	Account: LEVIN
_	Poll Watcher GOTV Stipend			
5	SUBTOTAL of Disbursements This Page (optional	l)		3455.03

FE6AN026

S	CHEDULE L-B (FEC Form 3X)	Γ	Hen congrato achadula(a)	FOR LINE NUMBER: PAGE 244 / 534
	EMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only one)
<u>C</u>	F LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	ly Information copied from such Reports and Stateme for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza John Arrington	tion Nan	ne	Transaction ID: 4B01130.E24583 Date of Disbursement
	Mailing Address 31 E. 155th St.			111 10 12010
	City S Harvey II	tate	Zip Code 60426	Amount of Each Disbursement this Period
	Purpose of Disbursement Poll Watcher GOTV Stipend	_	00420	Account: LEVIN
— В.	Full Name (Last, First, Middle Initial) / Full Organiza	tion Nan	пе	Transaction ID: 4B01130.E24586 Date of Disbursement
	Robert Colby  Mailing Address 16207 Eagle Ridge Dr.			11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S Tinley Park II	tate	Zip Code 60477	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
С.	Full Name (Last, First, Middle Initial) / Full Organiza Tonia Members	tion Nan	ne	Transaction ID: 4B01130.E24591 Date of Disbursement
<b>O</b> .	Mailing Address 7736 S. May St.			11 M M / D D / Y Y Y Y Y
	City S Chicago II	tate	Zip Code 60620	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organiza Peter Catalano	tion Nan	ne	Transaction ID: 4B01130.E24584 Date of Disbursement
	Mailing Address 387 Lambert			111
	•	tate	Zip Code	Amount of Each Disbursement this Period
	Schaumburg II Purpose of Disbursement Poll Watcher GOTV Stipend	_	60193	Account: LEVIN
 E.	Full Name (Last, First, Middle Initial) / Full Organiza Anthony Catalano	tion Nan	ne	Transaction ID: 4B01130.E24585 Date of Disbursement
	Mailing Address 455 Atlantic Avenue			1 1 D D / Y Y Y Y Y Y Y
	City S Elk Grove Village II	tate	Zip Code 60007	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend	_	00007	Account: LEVIN
	SUBTOTAL of Disbursements This Page (optional)			450.00
T	OTAL This Period (last page this line number only)			<b>•</b>

S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 245 / 534
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)
0	F LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	y Information copied from such Reports and State for commercial purposes, other than using the nan			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Matthew Meyers	ization Na	me	Transaction ID: 4B01130.E24592 Date of Disbursement
	Mailing Address 5441 N. Sawyer			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60625	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organ Suzette Sosa	ization Na	me	Transaction ID: 4B01130.E24594 Date of Disbursement
	Mailing Address 5540 Oakton Avenue			11 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Morton Grove	State IL	Zip Code 60053	Amount of Each Disbursement this Period
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
— с.	Full Name (Last, First, Middle Initial) / Full Organ John McGuire	ization Na	me	Transaction ID: 4B01130.E24590 Date of Disbursement
	Mailing Address 4145 N Springfield Ave			111 D 7 2010
	City Chicago	State IL	Zip Code 60618-1811	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B01130.E24645 Date of Disbursement
	Mailing Address 9243 Latrobe			11 M M / D D / Y Y Y Y Y Y Y
	City Skokie	State IL	Zip Code 60077	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
 E.	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B01130.E24644 Date of Disbursement
	Mailing Address 9243 Latrobe			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Skokie	State IL	Zip Code 60077	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend	· <del>-</del>		Account: LEVIN
s	UBTOTAL of Disbursements This Page (optional)	)		500.00
Т	OTAL This Period (last page this line number only	/)		<b>&gt;</b>

ľ	TEMIZED DIS	BURSEMENTS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 246 / 534 (check only one)
A		from such Reports and State		not be sold or used by any pe	4b 4d
	NAME OF COMM Illinois Republic	ITTEE (In Full)	ne and add	lress of any political committee	e to solicit contributions from such committee
A.	Full Name (Last, F Phyllis Sunner	First, Middle Initial) / Full Orgar	ization Na	me	Transaction ID: 4B01130.E24596 Date of Disbursement
	Mailing Address	7506 N. Ridge Blvd. Unit F			M M / D D / Y Y Y Y Y Y
	City Chicago Purpose of Disburs	sament	State IL	Zip Code 60645	Amount of Each Disbursement this Period  100.00
	Poll Watcher GOT				Account: LEVIN
В.	Full Name (Last, F Merle Kaplan	First, Middle Initial) / Full Orgar	ization Na	me	Transaction ID: 4B01130.E24589 Date of Disbursement
	Mailing Address	345 W. Fullerton Pkwy #606			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		State	Zip Code	Amount of Each Disbursement this Period
	Chicago Purpose of Disburs Poll Watcher GOT		IL	60614	Account: LEVIN
С.	Full Name (Last, F Paul Sumner	First, Middle Initial) / Full Orgar	ization Na	me	Transaction ID: 4B01130.E24595 Date of Disbursement
	Mailing Address	7506 N. Ridge Ave. Unit F			M M / D D / Y Y Y Y Y
	City		State	Zip Code	Amount of Each Disbursement this Period
	Chicago Purpose of Disburs Poll Watcher GOT		IL	60645	Account: LEVIN
D.	Full Name (Last, F Willie Howard	First, Middle Initial) / Full Orgar	ization Na	me	Transaction ID: 4B01130.E24588 Date of Disbursement
	Mailing Address	7456 N. Rockwell St.			M M / D D / Y Y Y Y Y Y
	City Chicago		State IL	Zip Code 60645	Amount of Each Disbursement this Period 100.00
	Purpose of Disburs Poll Watcher GOT				Account: LEVIN
E.	Full Name (Last, F Jay Werner	First, Middle Initial) / Full Orgar	ization Na	me	Transaction ID: 4B01130.E24598 Date of Disbursement
	Mailing Address	4834 W. Argyle St.			11
	City Chicago		State IL	Zip Code 60630	Amount of Each Disbursement this Period 50.00
	Purpose of Disburs Poll Watcher GOT				Account: LEVIN
T	SUBTOTAL of Disbu	ursements This Page (optional)	)		400.00

C	CHEDITE L D (EEC Form 2V)			
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 247 / 534
IT	EMIZED DISBURSEMENTS		for each category of the Aggregation Page	(check only one)  4a 4c x 5
C	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX   5
	ny Information copied from such Reports and Statemen for commercial purposes, other than using the name a			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		,,	
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) / Full Organization	on Namo	9	Transaction ID: 4B01130.E24582 Date of Disbursement
	Mailing Address 555 W. Cornelia			M M / D D / Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60657	50.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organization	on Nam	е	Transaction ID: 4B01130.E24597 Date of Disbursement
	Mailing Address 6139 S. Bernon St.			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta Chicago IL	te	Zip Code 60637	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement		00037	
	Poll Watcher GOTV Stipend			Account: LEVIN
<b>—</b> с.	Full Name (Last, First, Middle Initial) / Full Organizati	on Nam	9	Transaction ID: 4B01130.E24599 Date of Disbursement
	Hillel Weinberg  Mailing Address 311 N. Underwood St.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Falls Church VA	4	22046	400.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
<b>—</b> D.	Full Name (Last, First, Middle Initial) / Full Organizati Nathan Cardon	on Name	9	Transaction ID: 4B01130.E24600 Date of Disbursement
	Mailing Address 1400 Irving St. NW #626			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Washington D0	)	20010	1000.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
 E.	Full Name (Last, First, Middle Initial) / Full Organizati Gina Griffin	on Namo	e	Transaction ID: 4B01130.E24601 Date of Disbursement
	Mailing Address 174 W. Laurel St.			11 1
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Philadelphia PA	١	19123	3000.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
Ę	SUBTOTAL of Disbursements This Page (optional)			<b>4850.00</b>
占	TOTAL This Period (last page this line number only)			<u> </u>

5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 248 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name an			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	е	Transaction ID: 4B01130.E24602 Date of Disbursement
	Mailing Address 5990 Richmond Highway #409			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat		Zip Code	Amount of Each Disbursement this Period
	Alexandria VA		22303	1500.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	ne	Transaction ID: 4B01130.E24603 Date of Disbursement
	Mailing Address 630 N. 3rd St. #78			1 1 N N N N N N N N N N N N N N N N N N
	City Stat		Zip Code	Amount of Each Disbursement this Period
	Philadelphia PA		19123	4000.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
С.	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	e	Transaction ID: 4B01130.E24604 Date of Disbursement
	Venita Powells  Mailing Address 6622 S. Evans Ave.			111
	City Stat	e	Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60637	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	е	Transaction ID: 4B01130.E24605 Date of Disbursement
	Mailing Address 6541 S. Rhodes			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat Chicago IL	е	Zip Code 60637	Amount of Each Disbursement this Period
	Chicago IL Purpose of Disbursement		60637	100.00
	Poll Watcher GOTV Stipend			Account: LEVIN
E.	Full Name (Last, First, Middle Initial) / Full Organization Yolanda Vinso	n Nam	ne	Transaction ID: 4B01130.E24606 Date of Disbursement
	Mailing Address 6620 S. Evans			111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat	е	Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60637	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
	SUBTOTAL of Disbursements This Page (optional)			5800.00

_			
S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 249 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements n r for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization I Crystal Hill Mailing Address 6622 S. Evans Ave.	Name	Transaction ID: 4B01130.E24607 Date of Disbursement  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 6622 S. Evans Ave.		
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60637	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
_	·		- 4804400 504000
В.	Full Name (Last, First, Middle Initial) / Full Organization I Sharon Smith	Name	Transaction ID: 4B01130.E24608 Date of Disbursement
	Mailing Address 6620 S. Evans Ave.		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60637	100.00
	Purpose of Disbursement		Account: LEVIN
	Poll Watcher GOTV Stipend		Account. ELVIIV
	Full Name (Last, First, Middle Initial) / Full Organization I	Name	Transaction ID: 4B01130.E24609
C.	Angela McCullen		Date of Disbursement
	Mailing Address 6622 S. Evans Ave.		111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60637	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organization I	Name	Transaction ID: 4B01130.E24610 Date of Disbursement
υ.	Erika Vinson		M M / D D / Y Y Y Y
	Mailing Address 6001 S. Vernon #407		11 10 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60637	100.00
	Purpose of Disbursement		Account: LEVIN
	Poll Watcher GOTV Stipend		
E.	Full Name (Last, First, Middle Initial) / Full Organization I	Name	Transaction ID: 4B01130.E24611 Date of Disbursement
	Bernadette Owens		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 6001 S. Vernon Apt. 908		
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60637	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
Γ	SUBTOTAL of Disbursements This Page (optional)		F20.55
1	SOBTOTAL of Dispulsements This Page (optional)		500.00

IT C	CHEDULE L-B (FEC Form 3X) EMIZED DISBURSEMENTS OF LEVIN FUNDS by Information copied from such Reports and State	ements may	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a 4b 4c 4d 4c x 5 rson for the purpose of soliciting contributions
or	for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Illinois Republican Party	ne and add	dress of any political committee	to solicit contributions from such committee
Α.	Full Name (Last, First, Middle Initial) / Full Orgar Celifika Lewis	nization Na	me	Transaction ID: 4B01130.E24612 Date of Disbursement
	Mailing Address 6001 S. Vernon Apt. 506			11 M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago Purpose of Disbursement Poll Watcher GOTV Stipend	IL	60637	Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organ Janice Hubbard	nization Na	me	Transaction ID: 4B01130.E24613 Date of Disbursement
	Mailing Address 9321 S. Calumet Ave.			111
	City Chicago	State IL	Zip Code 60619	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
C.	Full Name (Last, First, Middle Initial) / Full Orgar Lloyd Howard	nization Na	me	Transaction ID: 4B01130.E24614 Date of Disbursement
	Mailing Address 8036 St. Lawrence			11 M M / D D / Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60619	Amount of Each Disbursement this Period
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organ Richard Odonnell	nization Na	me	Transaction ID: 4B01130.E24615 Date of Disbursement
	Mailing Address 3240 S. Aberdeen Rd. BR #1			11 M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago Purpose of Disbursement Poll Watcher GOTV Stipend	IL	60619	Account: LEVIN
 E.	Full Name (Last, First, Middle Initial) / Full Organ Ruby Turner	nization Na	me	Transaction ID: 4B01130.E24616 Date of Disbursement
	Mailing Address 6414 S. King Dr. Apt. 1C			11 M M / D D / Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60637	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
s	SUBTOTAL of Disbursements This Page (optional	)		500.00
Т	OTAL This Period (last page this line number only	y)		<b>&gt;</b>

C	CHEDIUS I DISECCE COME OV			
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 251 / 534
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)
_	F LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Stateme for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza Sabreen Elamin	tion Name	Э	Transaction ID: 4B01130.E24617 Date of Disbursement
	Mailing Address 8235 S. Calumet	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	ate	Zip Code	Amount of Each Disbursement this Period
	Chicago	=	60619	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organiza Christen Crawford	tion Name	Э	Transaction ID: 4B01130.E24618 Date of Disbursement
	Mailing Address 3757 S. Wabash			111 / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Si Chicago II	ate	Zip Code 60653	Amount of Each Disbursement this Period
	Purpose of Disbursement	_	00000	
	Poll Watcher GOTV Stipend			Account: LEVIN
C.	Full Name (Last, First, Middle Initial) / Full Organiza Frances Redman	tion Name	e	Transaction ID: 4B01130.E24619 Date of Disbursement
	Mailing Address 6620 S. Evans			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	tate	Zip Code 60637	Amount of Each Disbursement this Period
	Chicago II Purpose of Disbursement	_	00037	100.00
	Poll Watcher GOTV Stipend			Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organiza Lisa Marie Esper	tion Name	e	Transaction ID: 4B01130.E24620 Date of Disbursement
	Mailing Address 6536 S. King Dr. Apt. 4D	1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	•	ate	Zip Code	Amount of Each Disbursement this Period
	Chicago II		60637	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
— E.	Full Name (Last, First, Middle Initial) / Full Organiza	tion Name	9	Transaction ID: 4B01130.E24621 Date of Disbursement
	Robert Churchill			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 47 156th St.			
	•	ate	Zip Code	Amount of Each Disbursement this Period
	Calumet City II	_	60409	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
E	SUBTOTAL of Disbursements This Page (optional)			500.00
h	<b>**OTAL</b> This Period (last page this line number only)			<b>&gt;</b>

	SCHEDULE L-B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 252 / 534 (check only one)
_	OF LEVIN FUNDS  Any Information copied from such Reports and Statements ma		4b 4d
	r for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Andre Maples	ame	Transaction ID: 4B01130.E24622 Date of Disbursement
	Mailing Address 4500 S. Michigan		111
	City State Chicago IL  Purpose of Disbursement	Zip Code 60628	Amount of Each Disbursement this Period 100.00 Account: LEVIN
_	Poll Watcher GOTV Stipend		Account. LEVIIV
В.	Full Name (Last, First, Middle Initial) / Full Organization National Montgomery	ame	Transaction ID: 4B01130.E24623 Date of Disbursement
	Mailing Address 11016 S. Sangmon St.		11 10 2010
	City State Chicago IL	Zip Code 60643	Amount of Each Disbursement this Period
	Purpose of Disbursement Poll Watcher GOTV Stipend	00043	Account: LEVIN
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Latasha Armor	ame	Transaction ID: 4B01130.E24624 Date of Disbursement
	Mailing Address 6750 S. Merle, 3rd Fl.		111
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL  Purpose of Disbursement	60649	100.00
	Poll Watcher GOTV Stipend		Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Dawn Williams	ame	Transaction ID: 4B01130.E24625 Date of Disbursement
	Mailing Address 6463 S. Kenwood		111
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL  Purpose of Disbursement	60637	100.00
	Poll Watcher GOTV Stipend		Account: LEVIN
<b>-</b> Е.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B01130.E24626 Date of Disbursement
	Lloyd Coward  Mailing Address 8036 St. Lawrence		11
	City State Chicago IL	Zip Code 60619	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
Γ	SUBTOTAL of Disbursements This Page (optional)		500.00

S	CHEDULE L-B (FEC Form 3X)	Г	Use separate schedule(s)	FOR LINE NUMBER: PAGE 253 / 534
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)
0	F LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	y Information copied from such Reports and Statem- for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiz Martinez Bremmer	ation Nam	е	Transaction ID: 4B01130.E24627 Date of Disbursement
	Mailing Address 8159 S. Kingston			M M / D D / Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
		<u>IL</u>	60617	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organiz Latonya Cook	ation Nam	е	Transaction ID: 4B01130.E24628 Date of Disbursement
	Mailing Address 3049 Stafford Dr.			111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State IL	Zip Code 60426	Amount of Each Disbursement this Period
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
— с.	Full Name (Last, First, Middle Initial) / Full Organiz	ation Nam	е	Transaction ID: 4B01130.E24629 Date of Disbursement
•	Johnathan Battle  Mailing Address 16422 California St.			11 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code 60426	Amount of Each Disbursement this Period
	Harvey Purpose of Disbursement	IL.	00420	Account: LEVIN
_	Poll Watcher GOTV Stipend			
D.	Full Name (Last, First, Middle Initial) / Full Organiz Sonya Lewis	ation Nam	е	Transaction ID: 4B01130.E24630 Date of Disbursement
	Mailing Address 6100 S. Evans BSMT Apt.			1 1 M M / D D / Y 2 0 1 0 Y
	City	State	Zip Code	Amount of Each Disbursement this Period
		IL	60637	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
 E.	Full Name (Last, First, Middle Initial) / Full Organiz Crystal Crosby	ation Nam	е	Transaction ID: 4B01130.E24631 Date of Disbursement
	Mailing Address 8230 S. Bishop			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State	Zip Code	Amount of Each Disbursement this Period
		IL	60620	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
s	UBTOTAL of Disbursements This Page (optional)			500.00
T	OTAL This Period (last page this line number only)			<b>•</b>

_	OUEDINE L. D. (EEO E OV)			
5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 254 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
_	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Stater r for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
	Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B01130.E24632 Date of Disbursement
	Lasean Smith			M M / D D / Y Y Y
	Mailing Address 10812 S. Halsted			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60628	100.00
	Purpose of Disbursement			Account: LEVIN
_	Poll Watcher GOTV Stipend			7,0000 22.7
В.	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B01130.E24633 Date of Disbursement
	Bruce Crosby			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 8230 S. Bishop			11 10 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60620	100.00
	Purpose of Disbursement			Account: LEVIN
	Poll Watcher GOTV Stipend			
^	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B01130.E24634 Date of Disbursement
C.	Sharon Thomas			
	Mailing Address 9659 S. Greenwich			11 M M / D D / Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60617	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
_	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me.	Transaction ID: 4B01130.E24635
D.	Jeremy Segal	241011144		Date of Disbursement
	Mailing Address 2636 W. Winona St. #3E			1 1 M M / D D / Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60625	400.00
	Purpose of Disbursement			Account: LEVIN
_	Poll Watcher GOTV Stipend			Account ELVIIV
E.	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B01130.E24636 Date of Disbursement
	William Crosby			
	Mailing Address 8230 S. Bishop			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Chicago	IL	60620	50.00
	Purpose of Disbursement			Account: LEVIN
	Poll Watcher GOTV Stipend			Account. LLVIIV
	SUBTOTAL of Disbursements This Page (optional)			750.00

S	CHEDULE L-B (FEC Form 3X)	Llas asperata asbadula(a)	FOR LINE NUMBER: PAGE 255 / 534
	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
	F LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements ma	y not be sold or used by any per	son for the purpose of soliciting contributions
	for commercial purposes, other than using the name and ad-		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Isreal Sierra	ame	Transaction ID: 4B01130.E24637 Date of Disbursement
	Mailing Address 1933 N. Kimball		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	Zip Code 60647	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement	00047	
	Poll Watcher GOTV Stipend		Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B01130.E24638 Date of Disbursement
	David Augusto  Mailing Address 2818 N. Christiana		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60647	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
С.	Full Name (Last, First, Middle Initial) / Full Organization Na Jose Cruz	ame	Transaction ID: 4B01130.E24639 Date of Disbursement
	Mailing Address 3820 N. Central Park		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	Zip Code 60647	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
<b>D</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Prudencio Benitez	ame	Transaction ID: 4B01130.E24640 Date of Disbursement
	Mailing Address 1847 N. Albany		111 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60647	50.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
 E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B01130.E24641 Date of Disbursement
	Isreal Acevedo  Mailing Address 843 N. Francisco		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60622	50.00
	Purpose of Disbursement Poll Watcher GOTV Stipend		Account: LEVIN
S	SUBTOTAL of Disbursements This Page (optional)		▶ 300.00
╁	OTAL This Period (last page this line number only)		<b>&gt;</b>

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5	SCHEDULE L-B (FEC Form 3X)	Г	Llas asperato asbadula(s)	FOR LINE NUMBER: PAGE 256 / 534
	TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only one)
	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Stateme r for commercial purposes, other than using the name			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiza Antonio Nieves	tion Nan	ne	Transaction ID: 4B01130.E24642 Date of Disbursement
	Mailing Address 3432 N. Keeler			M M / D D / Y Y Y Y Y Y
	City S Chicago II	tate	Zip Code 60651	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
В.	Full Name (Last, First, Middle Initial) / Full Organiza Narcisiciso Orta	tion Nan	пе	Transaction ID: 4B01130.E24643 Date of Disbursement
	Mailing Address 3127 N. Keating			111
	•	ate	Zip Code 60647	Amount of Each Disbursement this Period
	Chicago II  Purpose of Disbursement  Poll Watcher GOTV Stipend	_	00047	Account: LEVIN
- с.	Full Name (Last, First, Middle Initial) / Full Organiza	tion Nan	ne	Transaction ID: 4B01130.E24646 Date of Disbursement
<b>.</b>	Alvin Hall  Mailing Address 935 N. Carlisle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	tate	Zip Code	Amount of Each Disbursement this Period
	Round Lake II		60073	100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
D.	Full Name (Last, First, Middle Initial) / Full Organiza Ricky Johnson	tion Nan	ne	Transaction ID: 4B01130.E24647 Date of Disbursement
	Mailing Address 6446 S. Kenwood St. Apt. 102			111
	•	ate	Zip Code 60637	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Poll Watcher GOTV Stipend			Account: LEVIN
E.	Full Name (Last, First, Middle Initial) / Full Organiza	tion Nan	пе	Transaction ID: 4B01130.E24653 Date of Disbursement
	Mailing Address 2704 Cronin Dr			111 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	ate	Zip Code	Amount of Each Disbursement this Period
	Springfield II	_	62711-7083	1588.48
•	Purpose of Disbursement REIMBURSEMENT: SEE BELOW			Account: LEVIN
ſ	SUBTOTAL of Disbursements This Page (optional)			1888.48

lmaç	pe# 11990326952		
	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 257 / 534 (check only one)
	EMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	4a 4c x 5
Ai	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Illinois Republican Party	ame	Transaction ID: 4B10317.E26415 Date of Disbursement
	Mailing Address Cole Taylor Non-Federal Accour 205 W. Randolph Suite 1245	nt	10 25 2010
	City State Chicago IL	Zip Code 60606	Amount of Each Disbursement this Period 261.00
	Purpose of Disbursement Memo: GOTV Mileage Reimbursement		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Randolph & Wells Self Parking	ame	Transaction ID: 4B10317.E26418 Date of Disbursement
	Mailing Address 200 W. Randolph Street		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	Zip Code 60601	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: GOTV Parking Garage Reimburse		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Doubletree Hotel	ame	Transaction ID: 4B10317.E26425 Date of Disbursement
	Mailing Address 10 Brickyard Dr.		111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Bloomington IL	Zip Code 61701	Amount of Each Disbursement this Period 99.68
	Purpose of Disbursement Memo: GOTV Hotel Reimbursement		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Lock Stock & Barrell	ame	Transaction ID: 4B10317.E26421 Date of Disbursement
	Mailing Address 129 S Oakland Ave		M M / D D / Y Y Y Y Y
	City State Decatur IL	Zip Code 62522-2929	Amount of Each Disbursement this Period 47.85
	Purpose of Disbursement Memo: GOTV Meal Reimbursement		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Holiday Inn	ame	Transaction ID: 4B10317.E26420 Date of Disbursement
	Mailing Address 350 W. Mart Center Drive		10 27 / 2010
	City State Chicago IL	Zip Code 60654	Amount of Each Disbursement this Period 265.44
	Purpose of Disbursement  Memo: GOTV Hotel Reimbursement	55551	Account: LEVIN [MEMO ITEM]
ļ	SUBTOTAL of Disbursements This Page (optional)		► 0.00

0.00

Imaç	ge# 11990326953			
S	CHEDULE L-B (FEC Form 3X)		Lles servets schedule(s)	FOR LINE NUMBER: PAGE 258 / 534
П	EMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only one)
	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organizatio Holiday Inn	Transaction ID: 4B10317.E26422 Date of Disbursement		
	Mailing Address 350 W. Mart Center Drive			111 / 04 / Y Y Y Y Y
	City State Chicago IL	е	Zip Code 60654	Amount of Each Disbursement this Period
	Purpose of Disbursement  Memo: GOTV Hotel Reimbursement	Account: LEVIN [MEMO ITEM]		
В.	Full Name (Last, First, Middle Initial) / Full Organizatio Holiday Inn Express	n Nam	ne	<b>Transaction ID:</b> 4B10317.E26419 Date of Disbursement
	Mailing Address 640 N. Wabash Avenue	10 25 7 2010		
	City Stat	Э	Zip Code	Amount of Each Disbursement this Period
	Chicago IL Purpose of Disbursement		60611	176.57
	Memo: GOTV Hotel Reimbursement			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organizatio Randolph Wells Self Parking	n Nam	ne	<b>Transaction ID:</b> 4B10317.E26423 Date of Disbursement
	Mailing Address 200 W. Randolph St.	111 / 04 / Y Y Y Y		
	City State Chicago IL	е	Zip Code 60606	Amount of Each Disbursement this Period 30.74
	Purpose of Disbursement Memo: GOTV Parking Garage Reimburse		00000	Account: LEVIN [MEMO ITEM]
<b>D</b> .	Full Name (Last, First, Middle Initial) / Full Organizatio Ontario Garage	n Nam	ne	Transaction ID: 4B10317.E26417 Date of Disbursement
	Mailing Address 10 E. Ontario			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	е	Zip Code 60611	Amount of Each Disbursement this Period 34.00
	Purpose of Disbursement		00011	Account: LEVIN
	Memo: GOTV Parking Garage Reimburse			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organizatio Grand Lux	n Nam	ne	<b>Transaction ID:</b> 4B10317.E26416 Date of Disbursement
	Mailing Address 600 N Michigan Ave	10 25 7 2010		
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60611-3113	126.10
	Purpose of Disbursement Memo: GOTV Operation			Account: LEVIN [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) ......

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0.00

ľ	SCHEDULE L-B (FEC Form 3X) TEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 259 / 534 (check only one)  4a 4c x 5
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Hyatt Regency	ame	Transaction ID: 4B10317.E26426 Date of Disbursement
	Mailing Address 151 E Wacker Dr		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	Zip Code 60601-3764	Amount of Each Disbursement this Period 350.00
	Purpose of Disbursement  Memo: GOTV Hotel Reimbursement		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Joe Weiss	ame	Transaction ID: 4B01130.E24654 Date of Disbursement
	Mailing Address 1683 Constitution Dr		11 2010
	City State Glenview IL	Zip Code 60026-7705	Amount of Each Disbursement this Period 729.16
	Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Account: LEVIN
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Google	ame	Transaction ID: 4B10316.E24963 Date of Disbursement
	Mailing Address 1600 Amphitheatre Parkway		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Mountain View CA	Zip Code 94043	Amount of Each Disbursement this Period 473.56
	Purpose of Disbursement	34043	Account: LEVIN
_	ITEMIZE: GOTV Ads/Website		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Facebook	ame	Transaction ID: 4B10316.E24964 Date of Disbursement
	Mailing Address 1601 S. California Ave.		1 1 M / D D / Y Y Y Y Y Y
	City State Palo Alto CA	Zip Code 94304	Amount of Each Disbursement this Period 255.60
	Purpose of Disbursement ITEMIZE: GOTV Ads/Website		Account: LEVIN [MEMO ITEM]
<b>Е</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Wolfe Rewards & Loyalty	ame	Transaction ID: 4B01130.E24580 Date of Disbursement
	Mailing Address 495 Mansfield Ave		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Pittsburgh PA Purpose of Disbursement	15205	27390.00 Account: LEVIN
	Itemize: See Below		Account. LL VIIV
	SUBTOTAL of Disbursements This Page (optional)		28119.16

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 260 / 534
IT	EMIZED DISBURSEMENTS	for each category of the	(check only one)
C	F LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Fae Diethert	Name	Transaction ID: 4B10315.E24844 Date of Disbursement
	Mailing Address 403 Muriel Ct.		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheeling IL	60090	20.00
_	Purpose of Disbursement Memo: Generic GOTV Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Diethert Fae	Name	Transaction ID: 4B10317.E25044 Date of Disbursement
	Mailing Address 403 Muriel Ct		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheeling IL	60090	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization N Sierwatka Steve	lame	Transaction ID: 4B10317.E25045 Date of Disbursement
	Mailing Address 499 Muriel Ct		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheeling IL	60090	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Rebarchak Steve	lame	Transaction ID: 4B10317.E25046 Date of Disbursement
	Mailing Address 1111 S Waukegan Rd. Unit 9		1 0 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Lake Forest IL	60045	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25816 Date of Disbursement
	Rebarchak Steve  Mailing Address 1111 S Waukegan Rd. Unit 9		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Lake Forest IL	60045	20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
-	SUBTOTAL of Disbursements This Page (optional)		D 000

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a 4c 4c 4d 5
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Name Mccall	Jame	Transaction ID: 4B10317.E25047 Date of Disbursement
	Mailing Address 1443 N Race		10 M / D D / Y Y Y Y Y
	City State Arlington Heights IL	Zip Code 60004	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25048 Date of Disbursement
	Mailing Address 1443 N Race		10 30 2010
	City State Arlington Heights IL	Zip Code 60004	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>C</b> .	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25820 Date of Disbursement
	Mailing Address 1443 N Race		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Arlington Heights IL	Zip Code 60004	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25821 Date of Disbursement
	Mailing Address 1443 N Race		11 M M / D D / Y Y Y Y Y
	City State	Zip Code 60004	Amount of Each Disbursement this Period
	Arlington Heights IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	60004	Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization N Lopez Laura	lame	Transaction ID: 4B10317.E25049 Date of Disbursement
	Mailing Address 1524 N Dryden Ave		10 M / D D / Y Y Y Y Y
	City State Arlington Heights IL	Zip Code 60004	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ţ	SUBTOTAL of Disbursements This Page (optional)		0.00

_	SOUEDINE L. D. (FEO. Farma OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 262 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiz Lopez Laura	zation Na	me	Transaction ID: 4B10317.E25050 Date of Disbursement
	Mailing Address 1524 N Dryden Ave			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Lopez Laura	ation Na	ame	Transaction ID: 4B10317.E25818 Date of Disbursement
	Mailing Address 1524 N Dryden Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organiz Lopez Laura	zation Na	ame	Transaction ID: 4B10317.E25819 Date of Disbursement
	Mailing Address 1524 N Dryden Ave			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Lopez Laura	zation Na	ame	Transaction ID: 4B10317.E25095 Date of Disbursement
	Mailing Address 1524 N Dryden Ave			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Kinard Wesley	zation Na	ame	Transaction ID: 4B10317.E25051 Date of Disbursement
	Mailing Address 1063 Half Day Rd			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	IL	60035	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

_	COLEDING L. D. (EEO Form OV)	_		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 263 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
(	OF LEVIN FUNDS		Aggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Kinard Wesley	Nam	ne	Transaction ID: 4B10317.E25052 Date of Disbursement
	Mailing Address 1063 Half Day Rd			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Highland Park IL		60035	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Kottler Jeremy	Nam	ne	<b>Transaction ID:</b> 4B10317.E25053 Date of Disbursement
	Mailing Address 540 Audubon PI			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Highland Park IL		60035	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Kottler Jeremy	Nan	ne	Transaction ID: 4B10317.E25054 Date of Disbursement
	Mailing Address 540 Audubon Pl			10 M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Highland Park IL		60035	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Nam	ne	Transaction ID: 4B10317.E25055
D.	Svetov Kellan			Date of Disbursement
	Mailing Address 2380 Highmoor Rd			10 M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Highland Park IL		60035	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Svetov Kellan	Nam	ne	<b>Transaction ID:</b> 4B10317.E25056 Date of Disbursement
	Mailing Address 2380 Highmoor Rd			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Highland Park IL		60035	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

S	SCHEDULE L-B (FEC Form 3X)	U	se separate schedule(s)	FOR LINE NUMBER: PAGE 264 / 534
ľ	TEMIZED DISBURSEMENTS		or each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	A	ggregation Page	4a   4c   x   5 4b   4d
	ny Information copied from such Reports and Statements nor for commercial purposes, other than using the name and a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization   Diaz Enrique	Name		Transaction ID: 4B10317.E25057 Date of Disbursement
	Mailing Address 144 Green Bay Rd, Apt 2			M M / D D / Y Y Y Y Y Y
	City State Highwood IL		Zip Code 60040	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization   Diaz Enrique	Name		Transaction ID: 4B10317.E25058 Date of Disbursement
	Mailing Address 144 Green Bay Rd, Apt 2			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Highwood IL		Zip Code 60040	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Vaysburg Irvin	Name		Transaction ID: 4B10317.E25059 Date of Disbursement
	Mailing Address 1931 Sheridan Road			M M / D D / Y Y Y Y Y Y
	City State Buffalo Grove IL		Zip Code 60089	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Vaysburg Irvin	Name		Transaction ID: 4B10317.E25060 Date of Disbursement
	Mailing Address 1931 Sheridan Road			M M / D D / Y Y Y Y Y
	City State Buffalo Grove IL		Zip Code 60089	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		0000	Account: LEVIN [MEMO ITEM]
- Е.	Full Name (Last, First, Middle Initial) / Full Organization	Name		Transaction ID: 4B10317.E25497 Date of Disbursement
	Vaysburg Irvin  Mailing Address 1931 Sheridan Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Buffalo Grove IL		Zip Code 60089	Amount of Each Disbursement this Period
	Purpose of Disbursement		00009	20.00
<b>-</b>	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 265 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5
	ny Information copied from such Reports and State or for commercial purposes, other than using the na			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Vaysburg Irvin	nization Na	ame	Transaction ID: 4B10317.E25498 Date of Disbursement
	Mailing Address 1931 Sheridan Road			10 M A A A A A A A A A A A A A A A A A A
	City Buffalo Grove	State IL	Zip Code 60089	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Vaysburg Irvin	nization Na	ame	Transaction ID: 4B10317.E26173 Date of Disbursement
	Mailing Address 1931 Sheridan Road			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Buffalo Grove	State IL	Zip Code 60089	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organ Vaysburg Irvin	nization Na	me	Transaction ID: 4B10317.E26174 Date of Disbursement
	Mailing Address 1931 Sheridan Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Buffalo Grove	State IL	Zip Code 60089	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Vaysburg Irvin	nization Na	ame	Transaction ID: 4B10317.E25834 Date of Disbursement
	Mailing Address 1931 Sheridan Road			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Buffalo Grove	State IL	Zip Code 60089	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
- Е.	Full Name (Last, First, Middle Initial) / Full Organ	nization Na	ame	Transaction ID: 4B10317.E25835 Date of Disbursement
	Vaysburg Irvin  Mailing Address 1931 Sheridan Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Buffalo Grove	State IL	Zip Code 60089	Amount of Each Disbursement this Period
		IL	00003	20.00
<b>-</b>	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
1	SUBTOTAL of Disbursements This Page (optional	l)		0.00

,	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 266 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   Lx   5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiz Vaysburg Irvin	zation Na	me	Transaction ID: 4B10317.E25836 Date of Disbursement
	Mailing Address 1931 Sheridan Road			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Buffalo Grove	IL	60089	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Thiruliniski Eric	zation Na	me	Transaction ID: 4B10317.E26170 Date of Disbursement
	Mailing Address 19 Buckingham Lane			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Buffalo Grove	IL	60089	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organiz Thiruliniski Eric	zation Na	me	Transaction ID: 4B10317.E26171 Date of Disbursement
	Mailing Address 19 Buckingham Lane			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Buffalo Grove	IL	60089	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Thiruliniski Eric	zation Na	me	<b>Transaction ID:</b> 4B10317.E26172 Date of Disbursement
	Mailing Address 19 Buckingham Lane			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Buffalo Grove	IL	60089	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
- Е.	Full Name (Last, First, Middle Initial) / Full Organiz	zation Na	me	Transaction ID: 4B10317.E25548 Date of Disbursement
	Thiruliniski Eric  Mailing Address 19 Buckingham Lane			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Amount of Each Disbursement this Period
	Buffalo Grove	IL	60089	20.00
	Purpose of Disbursement		<del>-</del>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

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S	SCHEDULE L-B (FEC Form 3X)	Use	e separate schedule(s)	FOR LINE NUMBER:	PAGE 267 / 534
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	OF LEVIN FUNDS	Agg	gregation Page	4a 4b	4c <u>x</u> 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			son for the purpose of solicit	ting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
Α.	Full Name (Last, First, Middle Initial) / Full Organization Thiruliniski Eric	Name		Transaction ID: 4B Date of Disburseme	nt
	Mailing Address 19 Buckingham Lane			10 / 31	Y 2010 Y
	City State	Z	ip Code	Amount of Each Dis	bursement this Period
	Buffalo Grove IL	6	60089		20.00
	Purpose of Disbursement			Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
В.	Full Name (Last, First, Middle Initial) / Full Organization Thiruliniski Eric	Name		Transaction ID: 4B Date of Disburseme	nt
	Mailing Address 19 Buckingham Lane			10	2010
	City State	Z	ip Code	Amount of Each Dis	bursement this Period
	Buffalo Grove IL	6	60089		20.00
	Purpose of Disbursement			Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) / Full Organization Thiruliniski Eric	Name		Transaction ID: 4B Date of Disburseme	nt
	Mailing Address 19 Buckingham Lane			10	2010
	City State	Z	ip Code	Amount of Each Dis	bursement this Period
	Buffalo Grove IL	- 6	50089		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization Thiruliniski Eric	Name		Transaction ID: 4B Date of Disburseme	nt
	Mailing Address 19 Buckingham Lane			10 / 30	2010
	City State	Z	ip Code	Amount of Each Dis	bursement this Period
	Buffalo Grove IL	6	60089		20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN [MEMO ITEM]	
_					10017 F05100
E.	Full Name (Last, First, Middle Initial) / Full Organization Thiruliniski Eric	Name		Transaction ID: 4B Date of Disburseme	
	Mailing Address 19 Buckingham Lane			10 / 30	2010
	City State Buffalo Grove IL		ip Code 60089	Amount of Each Dis	bursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN	20.00
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
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;	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 268 / 534				
ı	TEMIZED DISBURSEMENTS		for each category of the	(check only one)				
_	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d				
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting cor or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such co								
	NAME OF COMMITTEE (In Full) Illinois Republican Party							
Α.	Full Name (Last, First, Middle Initial) / Full Organizati Thiruliniski Eric Mailing Address 19 Buckingham Lane	on Nam	е	Transaction ID: 4B10317.E25103 Date of Disbursement  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City Sta Buffalo Grove IL Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	te	Zip Code 60089	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]				
В.	Full Name (Last, First, Middle Initial) / Full Organizati Kelso Marybeth	on Nam	е	Transaction ID: 4B10317.E25063 Date of Disbursement				
	Mailing Address 13155 Sheffield Lane			10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City Sta	te	Zip Code	Amount of Each Disbursement this Period				
	Beach Park IL		60083	20.00				
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]				
с.	Full Name (Last, First, Middle Initial) / Full Organizati	on Nam	e	Transaction ID: 4B10317.E25064 Date of Disbursement				
	Gunchick Wesley  Mailing Address 1286 W. Everett			10 M / D D / Y Y Y Y Y Y				
	City Sta	te	Zip Code	Amount of Each Disbursement this Period				
	Des Plaines IL		60018	20.00				
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]				
D.	Full Name (Last, First, Middle Initial) / Full Organizati Gunchick Wesley	on Nam	е	Transaction ID: 4B10317.E25065 Date of Disbursement				
	Mailing Address 1286 W. Everett			10 M / D D / Y Y Y Y Y Y				
	City Sta Des Plaines IL	te	Zip Code 60018	Amount of Each Disbursement this Period 20.00				
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]				
E.	Full Name (Last, First, Middle Initial) / Full Organizati Gunchick Wesley	on Nam	е	Transaction ID: 4B10317.E26175 Date of Disbursement				
	Mailing Address 1286 W. Everett			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City Sta Des Plaines IL	te	Zip Code 60018	Amount of Each Disbursement this Period 20.00				
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]				
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	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization No Gunchick Wesley	ame	Transaction ID: 4B10317.E26176 Date of Disbursement
	Mailing Address 1286 W. Everett	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Des Plaines IL	Zip Code 60018	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Gunchick Wesley	ame	Transaction ID: 4B10317.E26177 Date of Disbursement
	Mailing Address 1286 W. Everett		111 02 / Y Y Y Y Y Y Y
	City State Des Plaines IL	Zip Code 60018	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
с.	Full Name (Last, First, Middle Initial) / Full Organization No	ame	Transaction ID: 4B10317.E25837 Date of Disbursement
	Mailing Address 1286 W. Everett		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Des Plaines IL	Zip Code 60018	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization No.	ame	Transaction ID: 4B10317.E26178 Date of Disbursement
	Mailing Address 845 N. Beverly Lane		M M / D D / Y Y Y Y Y
	City State Arlington Heights IL	Zip Code 60004	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	00004	Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E26179 Date of Disbursement
	Loomis Kate  Mailing Address 845 N. Beverly Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights IL	60004	20.00
<b>.</b>	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Loomis Kate	nization Na	ame	Transaction ID: 4B10317.E26180 Date of Disbursement
	Mailing Address 845 N. Beverly Lane			111 D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Arlington Heights	State IL	Zip Code 60004	Amount of Each Disbursement this Period 20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Loomis Kate	nization Na	ame	Transaction ID: 4B10317.E25066 Date of Disbursement
	Mailing Address 845 N. Beverly Lane			10 M / D D / Y Y Y Y Y
	City Arlington Heights	State IL	Zip Code 60004	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		00004	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Orgar Loomis Kate	nization Na	ame	Transaction ID: 4B10317.E25067 Date of Disbursement
	Mailing Address 845 N. Beverly Lane			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Orgar Loomis Kate	nization Na	ame	Transaction ID: 4B10317.E25068 Date of Disbursement
	Mailing Address 845 N. Beverly Lane			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Orgar Loomis Kate	nization Na	ame	Transaction ID: 4B10317.E25499 Date of Disbursement
	Mailing Address 845 N. Beverly Lane			10  31  2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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5	SCHEDULE L-B (FEC Form 3X)	Llas separata sebadula(a)	FOR LINE NUMBER: PAGE 271 / 534
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	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
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	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Nation Loomis Kate	Transaction ID: 4B10317.E25500 Date of Disbursement	
	Mailing Address 845 N. Beverly Lane	10 M / D D / Y Y Y Y Y	
	City State Arlington Heights IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	Zip Code 60004	Amount of Each Disbursement this Period 20.00 Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Tamson Stephanie	ame	Transaction ID: 4B10317.E25069 Date of Disbursement
	Mailing Address 8801 N Wisnor St Apt. 2		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Niles IL	Zip Code 60714	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	Account: LEVIN [MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Tamson Stephanie	ame	Transaction ID: 4B10317.E25070 Date of Disbursement
	Mailing Address 8801 N Wisnor St Apt. 2	10 M / D D / Y Y Y Y Y	
	City State Niles IL	Zip Code 60714	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	Account: LEVIN [MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Tamson Stephanie	Transaction ID: 4B10317.E25071 Date of Disbursement	
	Mailing Address 8801 N Wisnor St Apt. 2		10 M / D D / Y Y Y Y Y
	City State Niles IL	Zip Code 60714	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	Account: LEVIN [MEMO ITEM]	
E.	Full Name (Last, First, Middle Initial) / Full Organization No. Kirk Sherri	Transaction ID: 4B10317.E25072 Date of Disbursement	
	Mailing Address 511 Jutson	10 30 2010	
	City State Evanston IL	Zip Code 60202	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]

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Mailing Address 826 Shermer  City State Zip Code Glenview IL 60025  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Buckner Alison  Mailing Address 826 Shermer  City State Zip Code Glenview IL 60025  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Buckner Alison  Mailing Address 826 Shermer  City State Zip Code Glenview IL 60025  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Ross Phil Mailing Address 225 Forest Way Drive  City State Zip Code Amount of Each Disbursement  Momit of Each Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4810317.E25076  Date of Disbursement  Momit of Each Disbursement  Momit of Each Disbursement this Period  Amount of Each Disbursement this Period  Account: LEVIN [MEMO ITEM]  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Transaction ID: 4810317.E25077	_	OUEDINE L. D. (EEO Es was OV)	_		
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting committees for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.  A. Full Name (Last, First, Middle Initial) / Full Organization Name  A. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Evanstion  Purpose of Disbursement Memo: Generic Got/ Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Evanstion  Malling Address 826 Shermer  City State Zip Code Glienview  I. 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glienview  I. 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glienview  I. 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glienview  I. 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glienview  I. 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glienview  I. 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glienview  I. 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glienview  City State Zip Code Gli		·			
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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for for commencial purposes. Purpose of Disbursement Memor. Generic Got Incent Gift Card  8. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Evanston   L 60202   Amount of Each Disbursement this Period Evanston   Purpose of Disbursement Gift Card   Account: LEVIN [MEMO TIEM]  8. Full Name (Last, First, Middle Initial) / Full Organization Name Buckner Alison   Tanasaction ID: 4B10317.E25074   Date of Disbursement   L 0 0025   Date o		OF LEVIN FUNDS		Aggregation Fage	
Illinois Republican Party					
A. Kirk David Mailing Address 511 Jutison  City State Zip Code Evanston IL 60202  Purpose of Disbursement IIL 60202  Purpose of Disbursement IIL 60202  B. Harmon: Generic Gotor Incent Gift Card  Mailing Address 826 Shermer  City State Zip Code Glerview IL 60025  Purpose of Disbursement IIL 60025  City State Zip Code Glerview IL 60025  Purpose of Disbursement IIL 60025  CIty State Zip Code Glerview IL 60025  Purpose of Disbursement IIL 60025  Date of Disbursement III 60025  Purpose of Disbursement III 60025  Date of Disbursement III 60025  Purpose of Disbursement III 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  D. Ross Phil Mailing Address 225 Forest Way Drive  City State Zip Code Northforok III 60062  Purpose of Disbursement III 60062		` '			
City State Zip Code Evanston IL 60202  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  B. Full Name (Last, First, Middle Initial) / Full Organization Name B. Buckner Alison  Mailing Address 826 Shermer  City State Zip Code Glenview IL 60025  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  C. Buckner Alison  Mailing Address 826 Shermer  City State Zip Code Glenview IL 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  Buckner Alison  Mailing Address 826 Shermer  City State Zip Code Glenview IL 60025  Full Name (Last, First, Middle Initial) / Full Organization Name  Buckner Alison  Mailing Address 826 Shermer  City State Zip Code Glenview IL 60025  Purpose of Disbursement His Period  Glenview IL 60025  Purpose of Disbursement His Period  Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code North Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code North Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code North Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code North Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  Ross Phil Mailing Address 225 Forest Way Drive  City State Zip Code North Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  Ross Phil Mailing Address 225 Forest Way Drive  City State Zip Code North Gift Card  Account: LEVIN (MEMO ITEM)  Transaction ID: 4810317.E25077  Date of Disbursement this Period Disbursement T	Α.	,	Nam	9	Date of Disbursement
Evanston IL 60202  Purpose of Disbursement Memo: Generic Golv Incent Gilt Card  B. Full Name (Last, First, Middle Initial) / Full Organization Name Buckner Alison  Malling Address 826 Shermer  City State Zip Code Glenview IL 60025  Full Name (Last, First, Middle Initial) / Full Organization Name Buckner Alison  Malling Address 826 Shermer  C. Bulk Name (Last, First, Middle Initial) / Full Organization Name Buckner Alison  Malling Address 826 Shermer  Transaction ID: 4810317,E25074  Date of Disbursement this Period 20,00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4810317,E25075  Date of Disbursement  Memo: Generic Golv Incent Gilt Card  Purpose of Disbursement Memo: Generic Golv Incent Gilt Card  D. Full Name (Last, First, Middle Initial) / Full Organization Name Ross Phil  Malling Address 225 Forest Way Drive  City State Zip Code Northbrook IL 60062  Purpose of Disbursement Memo: Generic Golv Incent Gilt Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Ross Phil  Malling Address 225 Forest Way Drive  City State Zip Code Northbrook IL 60062  Purpose of Disbursement Memo: Generic Golv Incent Gilt Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Ross Phil  Malling Address 225 Forest Way Drive  City State Zip Code Northbrook IL 60062  Purpose of Disbursement Memo: Generic Golv Incent Gilt Card  Transaction ID: 4810317,E25077 Date of Disbursement this Period Disbursement Ithis Period Northbrook IL 60062  Purpose of Disbursement Memo: Generic Golv Incent Gilt Card  Transaction ID: 4810317,E25077 Date of Disbursement Ithis Period Date of Disbursement Ithis Period Northbrook IL 60062  Account: LEVIN [MEMO ITEM]		Mailing Address 511 Jutson			10 30 7 2010
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S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 273 / 534
I.	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5
	ny Information copied from such Reports and Statem r for commercial purposes, other than using the nam			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organia Simon Nick	zation Na	me	Transaction ID: 4B10317.E25078 Date of Disbursement
	Mailing Address 782 Greenwood Road			10 M / D D / Y Y Y Y Y
	City Northbrook	State IL	Zip Code 60062	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi: Simon Nick	zation Na	me	Transaction ID: 4B10317.E25079 Date of Disbursement
	Mailing Address 782 Greenwood Road			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Northbrook	State IL	Zip Code 60062	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organi: Simon Nick	zation Na	me	Transaction ID: 4B10317.E25080 Date of Disbursement
	Mailing Address 782 Greenwood Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi: Simon Nick	zation Na	me	Transaction ID: 4B10317.E25081 Date of Disbursement
	Mailing Address 782 Greenwood Road			10 M / D D / Y Y Y Y Y
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	Northbrook	IL	60062	20.00
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E.	Full Name (Last, First, Middle Initial) / Full Organia Simon Nick	zation Na	me	Transaction ID: 4B10317.E25516 Date of Disbursement
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	Northbrook	IL	60062	20.00
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П	EMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only one)
	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizatio Simon Nick	Transaction ID: 4B10317.E25517 Date of Disbursement		
	Mailing Address 782 Greenwood Road	10 M / D D / Y Y Y Y Y		
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	Northbrook IL		60062	20.00
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В.	Full Name (Last, First, Middle Initial) / Full Organizatio Simon Nick	n Nan	ne	Transaction ID: 4B10317.E25518 Date of Disbursement
	Mailing Address 782 Greenwood Road			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	Northbrook IL		60062	20.00
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C.	Full Name (Last, First, Middle Initial) / Full Organizatio Simon Nick	Transaction ID: 4B10317.E25519 Date of Disbursement		
	Mailing Address 782 Greenwood Road	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Northbrook IL		60062	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	Account: LEVIN [MEMO ITEM]		
D.	Full Name (Last, First, Middle Initial) / Full Organizatio Simon Nick	n Nan	ne	Transaction ID: 4B10317.E25520 Date of Disbursement
	Mailing Address 782 Greenwood Road	M M / D D / Y Y Y Y Y		
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Northbrook IL		60062	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organizatio	Transaction ID: 4B10317.E25503 Date of Disbursement		
	Mailing Address 2550 Colbewood Dr	10		
	City Stat	e	Zip Code	Amount of Each Disbursement this Period
	Northbrook IL		60062	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) ......

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 275 / 534
П	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
C	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements	mayı	not be sold or used by any per	4b   4d
	for commercial purposes, other than using the name and			
$\setminus$	NAME OF COMMITTEE (In Full)			
	Illinois Republican Party			
L				Transaction ID: 4B10317.E25504
A.	Full Name (Last, First, Middle Initial) / Full Organization Sa Peter	i Nam	е	Date of Disbursement
				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2550 Colbewood Dr			31 2010
	City State	!	Zip Code	Amount of Each Disbursement this Period
	Northbrook IL		60062	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Nam	2	Transaction ID: 4B10317.E25082
В.	Sa Peter	IIVaIII	C	Date of Disbursement
	Mailing Address 2550 Colbewood Dr			10
	Walling Address 2000 Colbewood Di			10 30 2010
	City State	,	Zip Code	Amount of Each Disbursement this Period
	Northbrook IL		60062	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Nam	e	Transaction ID: 4B10317.E25083
C.	Sa Peter			Date of Disbursement
	Mailing Address 2550 Colbewood Dr			10 D D / Y Y Y Y Y Y
	City State	:	Zip Code	Amount of Each Disbursement this Period
	Northbrook IL		60062	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Nam	е	Transaction ID: 4B10317.E25827 Date of Disbursement
D.	Sa Peter			M M / D D / Y Y Y Y
	Mailing Address 2550 Colbewood Dr			111 01 2010
	0		7: 0 1	Amount of Each Disbursement this Period
	City State	!	Zip Code	
	Northbrook IL  Purpose of Disbursement		60062	20.00
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN
_				[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	Nam	е	Transaction ID: 4B10317.E25828 Date of Disbursement
	Sa Peter			M M / D D / Y Y Y Y
	Mailing Address 2550 Colbewood Dr			11 01 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Northbrook IL		60062	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
- 1 3	SUBTOTAL of Disbursements This Page (optional)			0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 276 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	any Information copied from such Reports and Statements may refor commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Murphy Kailey	ame	Transaction ID: 4B10317.E25084 Date of Disbursement
	Mailing Address 14 White Barn Rd		10 M J D D J Y Y Y Y Y Y
	City State Vernon Hills IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Murphy Kailey	ame	Transaction ID: 4B10317.E25085 Date of Disbursement
	Mailing Address 14 White Barn Rd		10 M / D D / Y Y Y Y Y Y
	City State Vernon Hills IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization N Murphy Kailey	ame	Transaction ID: 4B10317.E25086 Date of Disbursement
	Mailing Address 14 White Barn Rd		M M / D D / Y Y Y Y Y
	City State Vernon Hills IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Murphy Kailey	ame	Transaction ID: 4B10317.E25087 Date of Disbursement
	Mailing Address 14 White Barn Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Vernon Hills IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organization N Murphy Kailey	ame	Transaction ID: 4B10317.E25535 Date of Disbursement
	Mailing Address 14 White Barn Rd		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Vernon Hills IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

	OUEDIUE L. D. (FEO Farma OV)	_		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 277 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
	OF LEVIN FUNDS		Aggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statement r for commercial purposes, other than using the name ar			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Murphy Kailey	n Nan	ne	Transaction ID: 4B10317.E25536 Date of Disbursement
	Mailing Address 14 White Barn Rd			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ie	Zip Code	Amount of Each Disbursement this Period
	Vernon Hills IL		60061	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN
_	Memo. Generic Goty Incent Girt Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization  Murphy Kailey	n Nan	ne	Transaction ID: 4B10317.E25537 Date of Disbursement
	Mailing Address 14 White Barn Rd			10
	City Sta	ie	Zip Code	Amount of Each Disbursement this Period
	Vernon Hills IL		60061	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Murphy Kailey	n Nan	ne	Transaction ID: 4B10317.E25538 Date of Disbursement
	Mailing Address 14 White Barn Rd			10 M / D D / Y Y Y Y Y
	City Sta	ie	Zip Code	Amount of Each Disbursement this Period
	Vernon Hills IL		60061	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25528 Date of Disbursement
	Mailing Address 455 E Ohio			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ie	Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60611	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25529 Date of Disbursement
E.	Taylor Carr			M M / D D / Y Y Y Y
	Mailing Address 455 E Ohio			10 31 2010
	City Sta	ie	Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60611	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

	OUEDINE L. D. (FEO Farms OV)			
3	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 278 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
Α	iny Information copied from such Reports and Stateme r for commercial purposes, other than using the name a			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiza	tion Na	me	Transaction ID: 4B10317.E25530 Date of Disbursement
	Mailing Address 455 E Ohio			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	ate	Zip Code	Amount of Each Disbursement this Period
	Chicago	_	60611	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza Taylor Carr	tion Na	me	Transaction ID: 4B10317.E25088 Date of Disbursement
	Mailing Address 455 E Ohio			10 M / D D / Y Y Y Y Y Y
	O:t-:		7in Ondo	Amount of Each Disbursement this Period
	City Since Chicago II	ate	Zip Code 60611	20.00
	Purpose of Disbursement	-	00011	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_				
C.	Full Name (Last, First, Middle Initial) / Full Organiza Taylor Carr	tion Na	me	Transaction ID: 4B10317.E25832 Date of Disbursement
	Mailing Address 455 E Ohio			M M / D D / Y Y Y Y Y
	City	tate	Zip Code	Amount of Each Disbursement this Period
	Chicago II	-	60611	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organiza	tion Na	me	Transaction ID: 4B10317.E25833
D.	Taylor Carr			Date of Disbursement
	Mailing Address 455 E Ohio			1 1 M / D D / Y Y Y Y Y Y
	City	ate	Zip Code	Amount of Each Disbursement this Period
	Chicago	_	60611	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organiza	tion Na	me	Transaction ID: 4B10317.E25824
E.	Kirk Charlie			Date of Disbursement
	Mailing Address 418 Cherry Creek Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	tate	Zip Code	Amount of Each Disbursement this Period
	Prospect Heights II	-	60070	20.00
	Purpose of Disbursement			Account: LEVIN
•	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 279 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c LX 5
	any Information copied from such Reports and State or for commercial purposes, other than using the name			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Kirk Charlie	ization Na	me	Transaction ID: 4B10317.E25825 Date of Disbursement
	Mailing Address 418 Cherry Creek Ln			1 1 M M / D D / Y Y Y Y Y Y Y
	City Prospect Heights	State IL	Zip Code 60070	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Kirk Charlie	ization Na	me	Transaction ID: 4B10317.E25826 Date of Disbursement
	Mailing Address 418 Cherry Creek Ln			1 1 D D / Y Y Y Y Y
	City Prospect Heights	State	Zip Code 60070	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organ Kirk Charlie	ization Na	me	Transaction ID: 4B10317.E25089 Date of Disbursement
	Mailing Address 418 Cherry Creek Ln			10 M / D D / Y Y Y Y Y Y
	City Prospect Heights	State IL	Zip Code 60070	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Kirk Charlie	ization Na	me	Transaction ID: 4B10317.E25090 Date of Disbursement
	Mailing Address 418 Cherry Creek Ln	10 M / D D / Y Y Y Y Y		
	City Prospect Heights	State IL	Zip Code 60070	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organ Kirk Charlie	ization Na	me	Transaction ID: 4B10317.E25091 Date of Disbursement
	Mailing Address 418 Cherry Creek Ln			1 0 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Prospect Heights	State	Zip Code 60070	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	· <del>-</del>		Account: LEVIN [MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)	)		▶ 0.00

	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 280 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Fage	4a   4c LxJ5   4d   4d   4d   4d   4d   4d   4d   4
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Kirk Charlie	Nar	ne	Transaction ID: 4B10317.E25092 Date of Disbursement
	Mailing Address 418 Cherry Creek Ln			M M / B B / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Prospect Heights IL		60070	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Giallombardo Helen	Nar	ne	Transaction ID: 4B10317.E25093 Date of Disbursement
	Mailing Address 3602 Lawson Rd			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	!	Zip Code	Amount of Each Disbursement this Period
	Glenview IL		60026	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Giallombardo Helen	Nar	ne	Transaction ID: 4B10317.E25094 Date of Disbursement
	Mailing Address 3602 Lawson Rd			M M / B B / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Glenview IL		60026	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Burton Sami	Nar	ne	<b>Transaction ID:</b> 4B10317.E25096 Date of Disbursement
	Mailing Address 1114 N Hemlock			M M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Mt Prospect IL		60056	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Burton Sami	Nar	ne	Transaction ID: 4B10317.E25822 Date of Disbursement
	Mailing Address 1114 N Hemlock			111 01 7 2010
	City State Mt Prospect IL	!	Zip Code 60056	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 281 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	any Information copied from such Reports and Statements mor for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Burton Sami	lame	Transaction ID: 4B10317.E25823 Date of Disbursement
	Mailing Address 1114 N Hemlock		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Mt Prospect IL	60056	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Reeci Mccall	lame	Transaction ID: 4B10317.E25097 Date of Disbursement
	Mailing Address 1443 N Race		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights IL	60004	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Dahl Linda	lame	Transaction ID: 4B10317.E25098 Date of Disbursement
	Mailing Address 14643 Trailway Drive		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Lake Forest IL	60045	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Dahl Linda	lame	Transaction ID: 4B10317.E25099 Date of Disbursement
	Mailing Address 14643 Trailway Drive		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Lake Forest IL	60045	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25100 Date of Disbursement
⊏.	Dahl Linda		
	Mailing Address 14643 Trailway Drive		10 30 2010
	City State Lake Forest IL	Zip Code 60045	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 282 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Stateme or for commercial purposes, other than using the name of			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza Dahl Linda	tion Na	me	Transaction ID: 4B10317.E25101 Date of Disbursement
	Mailing Address 14643 Trailway Drive			10 M / D D / Y Y Y Y Y
	,	ate	Zip Code	Amount of Each Disbursement this Period
	Lake Forest II	=	60045	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza Deahl Evan	tion Na	me	Transaction ID: 4B10317.E25508 Date of Disbursement
	Mailing Address 1330 Sheridan Rd			10
	City S	ate	Zip Code	Amount of Each Disbursement this Period
	Highland Park II	=	60035	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiza Deahl Evan	tion Na	me	Transaction ID: 4B10317.E25509 Date of Disbursement
	Mailing Address 1330 Sheridan Rd			10 M / 31 / Y Y Y Y Y Y
	City	ate	Zip Code	Amount of Each Disbursement this Period
	Highland Park II		60035	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>-</b> D.	Full Name (Last, First, Middle Initial) / Full Organiza	tion Na	me	Transaction ID: 4B10317.E25539 Date of Disbursement
	Deahl Evan  Mailing Address 1330 Sheridan Rd			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S	ate	Zip Code	Amount of Each Disbursement this Period
	Highland Park II	-	60035	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiza Deahl Evan	tion Na	me	Transaction ID: 4B10317.E25105 Date of Disbursement
	Mailing Address 1330 Sheridan Rd			10
	City S	ate	Zip Code	Amount of Each Disbursement this Period
	Highland Park		60035	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

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٤	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 283 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Fage	4a 4c LX 5
	Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Orgar Deahl Evan	nization Na	ame	Transaction ID: 4B10317.E25106 Date of Disbursement
	Mailing Address 1330 Sheridan Rd			M M / D D D / Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Highland Park	IL	60035	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Orgar Parashchak Lana	nization Na	ame	Transaction ID: 4B10317.E25107 Date of Disbursement
	Mailing Address 202 W. 79th Street			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Willowbrook	IL	60527	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Orgar Parashchak Lana	nization Na	ame	Transaction ID: 4B10317.E25108 Date of Disbursement
	Mailing Address 202 W. 79th Street			M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Willowbrook	IL	60527	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Orgar Parashchak Lana	nization Na	ame	Transaction ID: 4B10317.E25510 Date of Disbursement
	Mailing Address 202 W. 79th Street			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Willowbrook	IL	60527	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Orgar Parashchak Lana	nization Na	ame	Transaction ID: 4B10317.E25511 Date of Disbursement
	Mailing Address 202 W. 79th Street			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Willowbrook	State IL	Zip Code 60527	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		00021	Account: LEVIN
<b>—</b>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional	)		0.00

Imaç	je# 11990326979		
	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 284 / 534 (check only one)
	EMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements more for commercial purposes, other than using the name and accommendations.		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Parashchak Lana	ame	Transaction ID: 4B10317.E25512 Date of Disbursement
	Mailing Address 202 W. 79th Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Willowbrook IL	Zip Code 60527	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Wittenberg Dave	ame	Transaction ID: 4B10317.E25532 Date of Disbursement
	Mailing Address 4163 West End Road	10	
	City State Downers Grove IL	Zip Code 60515	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization N Wittenberg Dave	Transaction ID: 4B10317.E25533 Date of Disbursement	
	Mailing Address 4163 West End Road	10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Downers Grove IL	Zip Code 60515	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
 D.	Full Name (Last, First, Middle Initial) / Full Organization N Wittenberg Dave	ame	Transaction ID: 4B10317.E25534 Date of Disbursement
	Mailing Address 4163 West End Road	M M / D D / Y Y Y Y Y Y	
	City State Downers Grove IL	Zip Code 60515	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	00010	Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organization N	Transaction ID: 4B10317.E25109 Date of Disbursement	
	Wittenberg Dave  Mailing Address 4163 West End Road	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL	60515	20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)		0.00

0.00

S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)		PAGE 285 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)	
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 4d	x 5
	ny Information copied from such Reports and Statements m		rson for the purpose of soliciting	contributions
L	NAME OF COMMITTEE (In Full)	· · ·		
	Illinois Republican Party			
K	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10	317.F25110
A.	Wittenberg Dave	anc	Date of Disbursement	
	Mailing Address 4163 West End Road		10 / 30 /	2010
	City State	Zip Code	Amount of Each Disbur	sement this Period
	Downers Grove IL	60515		20.00
	Purpose of Disbursement		Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10	317.E25111
В.	Wittenberg Dave		Date of Disbursement	
	Mailing Address 4163 West End Road		1 0 M J D D D J	2010
	City State	Zip Code	Amount of Each Disbur	sement this Period
	Downers Grove IL	60515		20.00
	Purpose of Disbursement		Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) / Full Organization N Wittenberg Dave	ame	Transaction ID: 4B10 Date of Disbursement	
	Mailing Address 4163 West End Road		10  30 /	2010
	City State	Zip Code	Amount of Each Disbur	sement this Period
	Downers Grove IL	60515		20.00
	Purpose of Disbursement		Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
<b>—</b> D.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10	317.E25829
٥.	Wittenberg Dave	M M / D D /	YYYY	
	Mailing Address 4163 West End Road	111 / 01	<sup>Y</sup> 2010 <sup>Y</sup>	
	City State	Zip Code	Amount of Each Disbur	sement this Period
	Downers Grove IL	60515		20.00
	Purpose of Disbursement		Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10	317.E25830
E.	Wittenberg Dave	Date of Disbursement	V V V V	
	Mailing Address 4163 West End Road		1 1 D D /	2010
	City State	Zip Code	Amount of Each Disbur	sement this Period
	Downers Grove IL	60515		20.00
	Purpose of Disbursement		Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
	SUBTOTAL of Disbursements This Page (optional)			0.00

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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 286 / 534 (check only one)
П	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
C	OF LEVIN FUNDS		Aggregation age	4b 4d 4d
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Berry Lawrence	Nam	ne	Transaction ID: 4B10317.E26218 Date of Disbursement
	Mailing Address 5 Winthrop Ct.			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	•	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Berry Lawrence	Nam	ne	Transaction ID: 4B10317.E26219 Date of Disbursement
	Mailing Address 5 Winthrop Ct.			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Berry Lawrence	Nam	ne	Transaction ID: 4B10317.E25573 Date of Disbursement
	Mailing Address 5 Winthrop Ct.			10
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	ne	Transaction ID: 4B10317.E25550
D.	Berry Lawrence			Date of Disbursement
	Mailing Address 5 Winthrop Ct.			10 M / D D / Y Y Y Y Y Y
	City State	;	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	Nam	ne	Transaction ID: 4B10317.E25113 Date of Disbursement
	Berry Lawrence			M M / D D / Y Y Y Y
	Mailing Address 5 Winthrop Ct.			10 30 2010
	City State	•	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	CIRTOTAL of Dichuroomonto This Page (antique)			
13	SUBTOTAL of Disbursements This Page (optional)			0.00

_	CHEDITIEL B (FFC Form 2V)	r		
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 287 / 534 (check only one)
П	TEMIZED DISBURSEMENTS		for each category of the	
C	OF LEVIN FUNDS		Aggregation Page	4a 4c Lx 5
	ny Information copied from such Reports and Statemer for commercial purposes, other than using the name a			erson for the purpose of soliciting contributions
$ \setminus $	NAME OF COMMITTEE (In Full)			
	Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Berry Lawrence	on Na	me	Transaction ID: 4B10317.E25114 Date of Disbursement
	Mailing Address 5 Winthrop Ct.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	Mailing Address 5 Withthop Ct.			10 30 2010
	City St:	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizat Berry Lawrence	on Na	me	Transaction ID: 4B10317.E25115 Date of Disbursement
	Mailing Address 5 Winthrop Ct.			10 30 Y Y Y Y Y Y
	Walling Address 5 Willeling Ct.			10 30 2010
	City St:	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<del>-</del> -	Full Name (Last, First, Middle Initial) / Full Organizat Berry Lawrence	on Na	me	Transaction ID: 4B10317.E25116 Date of Disbursement
	Mailing Address 5 Winthrop Ct.			M M / D D / Y Y Y Y Y
	City St:	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organizat	on Na	ne	Transaction ID: 4B10317.E25151
D.	Berry Lawrence			Date of Disbursement
	Mailing Address 5 Winthrop Ct.			10 M / D D / Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organizat	on Na	ne	Transaction ID: 4B10317.E25887
E.	Berry Lawrence			Date of Disbursement
	Mailing Address 5 Winthrop Ct.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City St	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
T,	SUBTOTAL of Disbursements This Page (optional)			
1,	or Diobardomonia This rage (optional)			0.00

ımag	Je# 11990326983		
П	CHEDULE L-B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 288 / 534 (check only one)
	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Smith Israel	Name	Transaction ID: 4B10317.E25117 Date of Disbursement
	Mailing Address 20913 Homeland Road		M M / D D / Y Y Y Y Y
	City State Matteson IL	Zip Code 60443	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	33710	Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Smith Israel	Name	Transaction ID: 4B10317.E25118 Date of Disbursement
	Mailing Address 20913 Homeland Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Matteson IL	Zip Code 60443	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Smith Jim	Name	Transaction ID: 4B10317.E25119 Date of Disbursement
	Mailing Address 220 Indiana Street		M M / D D / Y Y Y Y Y
	City State Park Forest IL	Zip Code 60466	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	00100	Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Smith Jim	Name	Transaction ID: 4B10317.E25120 Date of Disbursement
	Mailing Address 220 Indiana Street		M M / D D / Y Y Y Y Y Y
	City State Park Forest IL	Zip Code 60466	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	00100	Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Moore Leslie	Name	Transaction ID: 4B10317.E25121 Date of Disbursement
	Mailing Address 297 Fir Street		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Park Forest IL	Zip Code 60466	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
<b>—</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)		0.00

ımaç	je# 11990326984		
	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 289 / 534 (check only one)
	TEMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Noore Leslie	Name	Transaction ID: 4B10317.E25122 Date of Disbursement
	Mailing Address 297 Fir Street		10 M / 30 / Y Y Y Y Y
	City State Park Forest IL	Zip Code 60466	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Smith Mairim	Name	Transaction ID: 4B10317.E25123 Date of Disbursement
	Mailing Address 20913 Homeland Road		10 M / B D / Y Y Y Y Y
	City State Matteson IL	Zip Code 60443	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Smith Mairim	Name	Transaction ID: 4B10317.E25124 Date of Disbursement
	Mailing Address 20913 Homeland Road		10 M / D D / Y Y Y Y Y
	City State Matteson IL	Zip Code 60443	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Schmitz Paul	Name	Transaction ID: 4B10317.E25125 Date of Disbursement
	Mailing Address 2561 E. Lincoln Highway		10 M / D D / Y Y Y Y Y
	City State New Lenox IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u> —</u> Е.	Full Name (Last, First, Middle Initial) / Full Organization N Schmitz Paul	Name	Transaction ID: 4B10317.E25126 Date of Disbursement
	Mailing Address 2561 E. Lincoln Highway		10 M / D D / Y Y Y Y Y
	City State New Lenox IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		
_	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 290 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E25127 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Heights IL	60463	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E25128 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Heights IL	60463	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E25129 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Heights IL	60463	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25130 Date of Disbursement
υ.	Schumann Herb		
	Mailing Address 16 S. Country Squire Road		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Heights IL	60463	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25551
E.	Schumann Herb		Date of Disbursement
	Mailing Address 16 S. Country Squire Road		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Heights IL	Zip Code 60463	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	<del>-</del>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
٢	SUBTOTAL of Disbursements This Page (optional)		
- 1	CODITION DISDUISMINGTHS THIS Taye (Optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 291 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E26200 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		111 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Heights IL	Zip Code 60463	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E26201 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		11
	City State Palos Heights IL	Zip Code 60463	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E26202 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Heights IL	Zip Code 60463	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E25877 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		M M / D D / Y Y Y Y Y Y
	City State Palos Heights IL	Zip Code 60463	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization N Schumann Herb	ame	Transaction ID: 4B10317.E25878 Date of Disbursement
	Mailing Address 16 S. Country Squire Road		111
	City State Palos Heights IL	Zip Code 60463	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	00100	
•	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 292 / 534
17	EMIZED DISBURSEMENTS		for each category of the	(check only one)
C	F LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and State for commercial purposes, other than using the nar			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) 'Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Orgar Wojcik Mike	nization Na	ame	Transaction ID: 4B10317.E25880 Date of Disbursement
	Mailing Address 8705 S. 80th Court			11 01 7 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Hickory Hills	IL	60457	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Wojcik Mike	nization Na	ame	Transaction ID: 4B10317.E25881 Date of Disbursement
	Mailing Address 8705 S. 80th Court			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Hickory Hills	IL	60457	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organ Wojcik Mike	nization Na	ame	Transaction ID: 4B10317.E25882 Date of Disbursement
	Mailing Address 8705 S. 80th Court			1 1 M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Hickory Hills	IL	60457	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Wojcik Mike	nization Na	ame	Transaction ID: 4B10317.E25883 Date of Disbursement
	Mailing Address 8705 S. 80th Court			1 1 M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Hickory Hills	IL	60457	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organ Wojcik Mike	nization Na	ame	Transaction ID: 4B10317.E25570 Date of Disbursement
	Mailing Address 8705 S. 80th Court			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Hickory Hills	IL	60457	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Г	SURTOTAL of Disbursements This Page (optional	\		<b>.</b>

ımaç	Je# 11990326988		
S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 293 / 534
	EMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	(check only one)  4a  4c  x 5  4b  4d
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and		erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) 'Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E25552 Date of Disbursement
	Mailing Address 8705 S. 80th Court		10 31 7 2010
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E25553 Date of Disbursement
	Mailing Address 8705 S. 80th Court		10
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E26212 Date of Disbursement
	Mailing Address 8705 S. 80th Court		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
 D.	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E26213 Date of Disbursement
	Mailing Address 8705 S. 80th Court		111
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E26214 Date of Disbursement
	Mailing Address 8705 S. 80th Court		111 / 02 / Y Y Y Y
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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Aı	ny Information copied from such Reports and Statements n for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E25131 Date of Disbursement
	Mailing Address 8705 S. 80th Court		M M / D D / Y Y Y Y Y Y
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E25132 Date of Disbursement
	Mailing Address 8705 S. 80th Court		30 2010
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization Wojcik Mike	Name	Transaction ID: 4B10317.E25133 Date of Disbursement
	Mailing Address 8705 S. 80th Court		M M / D D / Y Y Y Y Y
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
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	Mailing Address 8705 S. 80th Court		M M / D D / Y Y Y Y Y
	City State Hickory Hills IL	Zip Code 60457	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	30101	Account: LEVIN [MEMO ITEM]
<u> —</u> Е.	Full Name (Last, First, Middle Initial) / Full Organization Brown Katie	Name	Transaction ID: 4B10317.E25135 Date of Disbursement
	Mailing Address 13808 S. Lawler		10
	City State Crestwood IL	Zip Code 60445	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS  Agregation Plage	_			
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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee or solicit contributions from such committee of solicit contributions from such committee of solicit contributions and solicit contributions from such committee of solicit contributions from such contribut	ľ	TEMIZED DISBURSEMENTS	for each category of the	
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	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Brown Katie	ame	Transaction ID: 4B10317.E25556 Date of Disbursement
	Mailing Address 13808 S. Lawler		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Crestwood IL	Zip Code 60445	Amount of Each Disbursement this Period 20.00
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В.	Full Name (Last, First, Middle Initial) / Full Organization Na Brown Katie	ame	Transaction ID: 4B10317.E25845 Date of Disbursement
	Mailing Address 13808 S. Lawler		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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 D.	Full Name (Last, First, Middle Initial) / Full Organization Na Brown Katie	ame	Transaction ID: 4B10317.E25847 Date of Disbursement
	Mailing Address 13808 S. Lawler		111
	City State Crestwood IL	Zip Code 60445	Amount of Each Disbursement this Period 20.00
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 E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25561 Date of Disbursement
	Kelly Patrick  Mailing Address 89 Old Creek Road		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Park IL Purpose of Disbursement	60464	20.00
<b>—</b>	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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17	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
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$\setminus$	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
<u>K</u>	Full Name /Last First Middle Initial) / Full Organization N	omo	<b>Transaction ID:</b> 4B10317.E25562
A.	Full Name (Last, First, Middle Initial) / Full Organization N Kelly Patrick	arrie	Date of Disbursement
	Mailing Address 89 Old Creek Road		10 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 89 Old Oreek Hoad		10 31 2010
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	Palos Park IL	60464	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25139
В.	Kelly Patrick	a	Date of Disbursement
	Mailing Address 89 Old Creek Road		10 30 Y Y Y Y Y Y
	That is great and a foot fload		10 00 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Park IL	60464	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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C.	Kelly Patrick		Date of Disbursement
	Mailing Address 89 Old Creek Road		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Park IL	60464	20.00
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D.	Kelly Patrick		
	Mailing Address 89 Old Creek Road		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	City State Palos Park IL	Zip Code	
		60464	20.00
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E.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25142 Date of Disbursement
	Kelly Patrick		M M / D D / Y Y Y
	Mailing Address 89 Old Creek Road		10 30 2010
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	City State Palos Park IL	Zip Code 60464	20.00
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5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 298 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
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Α.	Full Name (Last, First, Middle Initial) / Full Organization Goding Ben	Name	)	Transaction ID: 4B10317.E25143 Date of Disbursement
	Mailing Address 525 W. Arlington Place			10 M / D D / Y Y Y Y Y
	City State Chicago IL		Zip Code 60614	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Goding Ben	Name	)	Transaction ID: 4B10317.E25144 Date of Disbursement
	Mailing Address 525 W. Arlington Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL		Zip Code 60614	Amount of Each Disbursement this Period 20.00
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С.	Full Name (Last, First, Middle Initial) / Full Organization Goding Ben	Name	•	Transaction ID: 4B10317.E25145 Date of Disbursement
	Mailing Address 525 W. Arlington Place			M M / D D / Y Y Y Y Y Y
	City State Chicago IL		Zip Code 60614	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Goding Ben	Name	)	Transaction ID: 4B10317.E26193 Date of Disbursement
	Mailing Address 525 W. Arlington Place			M M / D D / Y Y Y Y Y
	City State Chicago IL		Zip Code 60614	Amount of Each Disbursement this Period 20.00
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- Е.	Full Name (Last, First, Middle Initial) / Full Organization	Name	)	Transaction ID: 4B10317.E26194 Date of Disbursement
	Goding Ben  Mailing Address 525 W. Arlington Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Chicago IL  Purpose of Disbursement		60614	20.00
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	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Z	<u> </u>		ID 4D40047 F0F040
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Goding Ben	ame	Transaction ID: 4B10317.E25849 Date of Disbursement
	Mailing Address 525 W. Arlington Place		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60614	20.00
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_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25850
В.	Goding Ben		Date of Disbursement
	Mailing Address 525 W. Arlington Place		11 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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	Chicago IL	60614	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Goding Ben	ame	<b>Transaction ID:</b> 4B10317.E25851 Date of Disbursement
	Mailing Address 525 W. Arlington Place		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60614	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Zitrik Allison	ame	Transaction ID: 4B10317.E25870 Date of Disbursement
	Mailing Address 444 W. St. James		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago	60610	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25871
E.	Zitrik Allison		Date of Disbursement
	Mailing Address 444 W. St. James		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
	Purpose of Disbursement		Account: LEVIN
-	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
- [	SUBTOTAL of Disbursements This Page (optional)		0.00

lmaç	ge# 11990326995		
	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 300 / 534 (check only one)
C	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Zitrik Allison	ame	Transaction ID: 4B10317.E25872 Date of Disbursement
	Mailing Address 444 W. St. James		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	Zip Code 60610	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Zitrik Allison	ame	Transaction ID: 4B10317.E25873 Date of Disbursement
	Mailing Address 444 W. St. James		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	Zip Code 60610	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Zitrik Allison	ame	Transaction ID: 4B10317.E26197 Date of Disbursement
	Mailing Address 444 W. St. James		111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Zitrik Allison	ame	Transaction ID: 4B10317.E26198 Date of Disbursement
	Mailing Address 444 W. St. James		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organization Na Zitrik Allison	ame	Transaction ID: 4B10317.E26199 Date of Disbursement
	Mailing Address 444 W. St. James		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 301 / 534
17	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements ma	uv not be sold or used by any per	4b 4d
	r for commercial purposes, other than using the name and ad		
$\setminus$	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
<b>L</b>	E. II Nicoco (Local Eigel Middle Lettel) (Egil Oggorication N		Transaction ID: 4B10317.E25564
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Zitrik Allison	ame	Date of Disbursement
			10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 444 W. St. James		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25565
В.	Zitrik Allison	ano	Date of Disbursement
	Mailing Address 444 W. St. James		10 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Maining Address 444 VV. St. James		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25566
C.	Zitrik Allison		Date of Disbursement
	Mailing Address 444 W. St. James		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25146 Date of Disbursement
D.	Zitrik Allison		
	Mailing Address 444 W. St. James		10
			Associated Fools District organization Deviced
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60610	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN
_	World. Garana Goty moont ant out		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25147 Date of Disbursement
	Zitrik Allison		M M / D D / Y Y Y Y
	Mailing Address 444 W. St. James		10 30 2010
	City	Zin Codo	Amount of Each Disbursement this Period
	City State Chicago IL	Zip Code 60610	20.00
	Purpose of Disbursement	00010	
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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- [ 3	SUBTOTAL of Disbursements This Page (optional)		0.00

0	CHEDITIET B (EEC Form 2V)	_		
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 302 / 534
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)
	F LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statement for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Zitrik Allison	ion Name	9	Transaction ID: 4B10317.E25148 Date of Disbursement
	Mailing Address 444 W. St. James			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60610	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizati Zitrik Allison	on Name	9	Transaction ID: 4B10317.E25149 Date of Disbursement
	Mailing Address 444 W. St. James			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta Chicago IL		Zip Code 60610	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organizati Cross David	ion Name	9	<b>Transaction ID:</b> 4B10317.E25150 Date of Disbursement
	Mailing Address 711 W Wrightwood			10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Chicago		60614	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Boltz Greg	on Name	9	Transaction ID: 4B10317.E25152 Date of Disbursement
	Mailing Address 1912 Brighton St.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organizat Boltz Greg	ion Name	9	Transaction ID: 4B10317.E25574 Date of Disbursement
	Mailing Address 1912 Brighton St.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
s	SUBTOTAL of Disbursements This Page (optional)			0.00
-	OTAL This Period (last page this line number only)			<b>&gt;</b>

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S	CHEDULE L-B (FEC Form 3X)		Llas apparata ashadula(a)	FOR LINE NUMBER: PAGE 303 / 534
П	EMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only one)
	F LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statemer for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organizat Boltz Greg	Transaction ID: 4B10317.E26220 Date of Disbursement		
	Mailing Address 1912 Brighton St.	11 M / D D / Y Y Y Y Y Y		
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	Account: LEVIN [MEMO ITEM]		
В.	Full Name (Last, First, Middle Initial) / Full Organizat Boltz Greg	ion Na	me	Transaction ID: 4B10317.E26221 Date of Disbursement
	Mailing Address 1912 Brighton St.			111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organizat Boltz Greg	ion Nar	me	Transaction ID: 4B10317.E25888 Date of Disbursement
	Mailing Address 1912 Brighton St.	M M / D D / Y Y Y Y Y Y Y		
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Bowen Laurel	ion Nar	me	Transaction ID: 4B10317.E25889 Date of Disbursement
	Mailing Address 829 Clyde Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organizat	ion Na	me	Transaction ID: 4B10317.E26222 Date of Disbursement
	Bowen Laurel  Mailing Address 829 Clyde Drive			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) ......

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S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	_	R LINE NUMBER: PAGE 304 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(Cn	eck only one)  4a  4c  x 5
(	OF LEVIN FUNDS		Aggregation Page		4a 4c 1x 5
	ny Information copied from such Reports and Statement r for commercial purposes, other than using the name an				
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
Α.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me		Transaction ID: 4B10317.E25575 Date of Disbursement
	Mailing Address 829 Clyde Drive				$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & \mathbf{D} \\ 3 & 1 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State Downers Grove IL	e	Zip Code 60516		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me		Transaction ID: 4B10317.E25153 Date of Disbursement
	Mailing Address 829 Clyde Drive				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City Stat  Downers Grove IL	e	Zip Code 60516		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement				Account: LEVIN
	Memo: Generic Gotv Incent Gift Card				[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization	n Nai	me		Transaction ID: 4B10317.E25154 Date of Disbursement
	Mailing Address 352 S Sleight				$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & \mathbf{D} \\ 3 & 0 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City Stat	e	Zip Code		Amount of Each Disbursement this Period
	Naperville IL		60540		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me		Transaction ID: 4B10317.E25576 Date of Disbursement
	Mailing Address 352 S Sleight				$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 0 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & \mathbf{D} \\ 3 & 1 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City Stat	e	Zip Code		Amount of Each Disbursement this Period
	Naperville IL		60540		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me		Transaction ID: 4B10317.E26223 Date of Disbursement
	Mailing Address 352 S Sleight				$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 1 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & \mathbf{D} \\ 0 & 2 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City Stat Naperville IL	e	Zip Code 60540		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		<del>-</del>		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card				[MEMO ITEM]
- [ :	SUBTOTAL of Disbursements This Page (optional)			<b>&gt;</b>	0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 305 / 534 (check only one)
	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Burfield Patrick	Name	Transaction ID: 4B10317.E25890 Date of Disbursement
	Mailing Address 352 S Sleight		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Naperville IL	Zip Code 60540	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Carlson Nancy	Name	Transaction ID: 4B10317.E25155 Date of Disbursement
	Mailing Address 21 4th Street		M M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Downers Grove IL	Zip Code 60515	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Cauley Ryan	Name	Transaction ID: 4B10317.E25156 Date of Disbursement
	Mailing Address 521 Morris Lane		M M / D D / Y Y Y Y Y
	City State Hinsdale IL	Zip Code 60521	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Cochran Jason	Name	Transaction ID: 4B10317.E25157 Date of Disbursement
	Mailing Address 425 Lake Ave.		M M / D D / Y Y Y Y Y
	City State		Amount of Each Disbursement this Period
	Downers Grove IL	60515	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Cochran Jason	Name	Transaction ID: 4B10317.E25158 Date of Disbursement
	Mailing Address 425 Lake Ave.		M M / D D / Y Y Y Y Y
	City State Downers Grove IL	Zip Code 60515	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
9	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 306 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and		person for the purpose of soliciting contributions
L	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25159 Date of Disbursement
	Cornelius Jim		M M / D D / Y Y Y Y
	Mailing Address 6401 Clarendon Hills, #105		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Willowbrook IL	60527	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25160 Date of Disbursement
	Corrigan James		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 328 Rowan Court		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Naperville IL	60540	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name /Leat First Middle Initial\ / Full Organization	Nome	Transaction ID: 4B10317.E25161
C.	Full Name (Last, First, Middle Initial) / Full Organization Corrigan James	ivame	Date of Disbursement
	Mailing Address 328 Rowan Court		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Naperville IL	60540	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Nama	Transaction ID: 4B10317.E25162
D.	Cuthbert Mark	ivanie	Date of Disbursement
	Mailing Address 617 S Washington		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 617 S Washington		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Hinsdale IL	60521	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25163
E.	Eastmond Andy	Namo	Date of Disbursement
	Mailing Address 1805 Darien Club Dr.		10 / 30 / Y Y Y Y Y Y Y
	Mailing Address 1003 Danen Club Dr.		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Darien IL	60561	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
$\vdash$	CURTOTAL of Dishura amonts This Daws (autions)		
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,	SOUEDINE L. D. (EEO Es OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 307 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LXJ 5   4d
	Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Z	Full Name (Last First Middle Initial) / Full Organ	ai-ation Na		Transaction ID: 4B10317.E25164
A.	Full Name (Last, First, Middle Initial) / Full Organ Eastmond Andy	IIZaliOII INa	une	Date of Disbursement
	Mailing Address 1805 Darien Club Dr.			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Darien	IL	60561	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Eastmond Margy	nization Na	ame	<b>Transaction ID:</b> 4B10317.E25165 Date of Disbursement
	Mailing Address 1805 Darien Club Dr.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Darien	IL	60561	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organ Eastmond Margy	nization Na	ame	Transaction ID: 4B10317.E25166 Date of Disbursement
	Mailing Address 1805 Darien Club Dr.			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Amount of Each Disbursement this Period
	Darien	IL	60561	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Orga	nization Na	ame	Transaction ID: 4B10317.E25167
D.	Giacomo Terrence			Date of Disbursement
	Mailing Address 504 S. Wilmette Ave.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Westmont	IL	60559	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Orga	nization Na	ame	<b>Transaction ID:</b> 4B10317.E25168
E.	Giacomo Terrence			Date of Disbursement
	Mailing Address 504 S. Wilmette Ave.			10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Westmont	IL	60559	20.00
	Purpose of Disbursement			Account: LEVIN
-	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional	)		0.00

_	OUEDINE L. D. (FEO Farms OV)			,
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 308 / 534
l.	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
A	any Information copied from such Reports and Statemer for commercial purposes, other than using the name			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25169 Date of Disbursement
	Mailing Address 504 S. Wilmette Ave.			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Westmont	L	60559	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<b>–</b> В.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25170 Date of Disbursement
	Mailing Address 27w306 Victoria Lane			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State	Zip Code	Amount of Each Disbursement this Period
		L	60190	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiza Wright Jeff	ation Na	me	Transaction ID: 4B10317.E25171 Date of Disbursement
	Mailing Address 1017 Elizabeth			10 M J D D J Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Naperville	L	60540	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<b>D</b> .	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E26226 Date of Disbursement
	Mailing Address 1017 Elizabeth			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Naperville	L	60540	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	ma	Transaction ID: 4B10317.E25172
E.	Zalzaleh Moe	allon iva	iiie	Date of Disbursement
	Mailing Address 825 S. Richmond Ave.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	L	60559	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Г	CURTOTAL of Dishara are sets This Days (s. 11. 1)			
- 1	SUBTOTAL of Disbursements This Page (optional)			0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 309 / 534
ı	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_		Aggregation Page	4a 4c x 5
_	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac		
K	NAME OF COMMITTEE (In Full)	, p	
	Illinois Republican Party		
^	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25173 Date of Disbursement
A.	Zalzaleh Moe		
	Mailing Address 825 S. Richmond Ave.		10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Westmont IL	60559	20.00
		00333	
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Falcon Penny	ame	Transaction ID: 4B10317.E25174 Date of Disbursement
	<u>·</u>		10
	Mailing Address 383 West Park Ave		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Aurora IL	60506	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_			-
C.	Full Name (Last, First, Middle Initial) / Full Organization National Penny	ame	Transaction ID: 4B10317.E25181 Date of Disbursement
	Mailing Address 383 West Park Ave		10 M / 30 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Aurora IL	60506	20.00
	Purpose of Disbursement		
	Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
_			<u> </u>
D.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25193 Date of Disbursement
٥.	Wyatt Gabby		M M / D D / Y Y Y Y
	Mailing Address 2590 Wyck Wood Ct		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Aurora IL	60506	20.00
	Purpose of Disbursement		
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
-	Full Massa (Last Flort Middle Latter (F. 11.0)		Transaction ID: 4B10317.E25194
E.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Date of Disbursement
	Wyatt Gabby		
	Mailing Address 2590 Wyck Wood Ct		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Aurora IL	60506	20.00
	Purpose of Disbursement		
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN
۲	Mono. Gonono Gote moont ant Odia		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 310 / 534
ı	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	Any Information copied from such Reports and Statements major for commercial purposes, other than using the name and add		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Wyatt Gabby	me	Transaction ID: 4B10317.E25175 Date of Disbursement
	Mailing Address 2590 Wyck Wood Ct		10 M / D D / Y Y Y Y Y
	City State Aurora IL	Zip Code 60506	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Wyatt Richy	ime	Transaction ID: 4B10317.E25176 Date of Disbursement
	Mailing Address 2590 Wyck Wood Ct		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Aurora IL	Zip Code 60506	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	00000	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Wyatt Richy	me	Transaction ID: 4B10317.E25182 Date of Disbursement
	Mailing Address 2590 Wyck Wood Ct		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Aurora IL	60506	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Spang Kathie	me	Transaction ID: 4B10317.E25184 Date of Disbursement
	Mailing Address 38w144 Beckman Trail		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Elgin IL	Zip Code 60124	Amount of Each Disbursement this Period 20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Spang Kathie	me	Transaction ID: 4B10317.E25208 Date of Disbursement
	Mailing Address 38w144 Beckman Trail		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Elgin IL	Zip Code 60124	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	0012 T	Account: LEVIN
-	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

_	SOUEDIUE L. D./FEO. Farras OV)				
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 311 / 534	
l.	TEMIZED DISBURSEMENTS		for each category of the	(check only one)	
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5	
Α	any Information copied from such Reports and Statemer for commercial purposes, other than using the name			son for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
A.	Full Name (Last, First, Middle Initial) / Full Organiza Spang Kathie	ation Na	me	Transaction ID: 4B10317.E25192 Date of Disbursement	
	Mailing Address 38w144 Beckman Trail			10 M / D D / Y Y Y Y Y	
	City	tate	Zip Code	Amount of Each Disbursement this Period	
	Elgin I	L	60124	20.00	
	Purpose of Disbursement			Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
<del>-</del> В.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25177 Date of Disbursement	_
	Spang Kathie			10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Mailing Address 38w144 Beckman Trail			30 2010	
	City	tate	Zip Code	Amount of Each Disbursement this Period	_
	-	L	60124	20.00	
	Purpose of Disbursement			Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organiza Schelich Amy	ation Na	me	Transaction ID: 4B10317.E25178 Date of Disbursement	_
	Mailing Address 39w250 Forbes Dr			M M / D D / Y Y Y Y Y Y	
	City	tate	Zip Code	Amount of Each Disbursement this Period	
	Geneva I	L	60134	20.00	
	Purpose of Disbursement			Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organiza Danklefsen Vicki	ation Na	me	Transaction ID: 4B10317.E25179 Date of Disbursement	_
	Mailing Address 39w249 E Mallory Dr			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	tate	Zip Code	Amount of Each Disbursement this Period	
	Geneva I	L	60134	20.00	
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
_				Transaction ID: 4B10317.E25180	_
E.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Date of Disbursement	
	Hays Jason  Mailing Address 414 Pennsylvania Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	tate	Zip Code	Amount of Each Disbursement this Period	
	•	L	60506	20.00	
	Purpose of Disbursement				
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
г	OUDTOTAL (DIL)				_
- 1	SUBTOTAL of Disbursements This Page (optional)			0.00	

_	OUEDINE L. D. (EEO Easter OV)			
5	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 312 / 534
П	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
C	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
Ai	ny Information copied from such Reports and Staten for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organi Ray Jackie	zation Na	me	Transaction ID: 4B10317.E25183 Date of Disbursement
	Mailing Address 2169 Savannah Rd			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Amount of Each Disbursement this Period
	Elgin	IL	60123	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN
_	World. General Getv moont ant our			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Goldstein Jim	zation Na	me	Transaction ID: 4B10317.E25185 Date of Disbursement
	Mailing Address 1123 E 1900 N Rd			10 30 / 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Gilman	IL	60938	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organi Sarley Chris	zation Na	me	<b>Transaction ID:</b> 4B10317.E25186 Date of Disbursement
	Mailing Address 1317 Weston Drive			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	Arlington Heights	IL	60004	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organi	zation Na	me	Transaction ID: 4B10317.E25187
D.	Roberts Craig			Date of Disbursement
	Mailing Address 916 6th Street			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Washington Dc	DC	20001	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organi	zation Na	me	Transaction ID: 4B10317.E25188 Date of Disbursement
E.	Willis Libby			
	Mailing Address Rr2 Box 201b			10 30 / Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Greenfield	IL	62044	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN
_	weno. Generic Goty incent Gift Card			[MEMO ITEM]
5	<b>SUBTOTAL</b> of Disbursements This Page (optional)			0.00

ımaç	je# 11990327008		
П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 313 / 534 (check only one)
Α	ny Information copied from such Reports and Statements meror for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Muller Virgina	Name	Transaction ID: 4B10317.E25189 Date of Disbursement
	Mailing Address 216 Maryland Ave Ne Apt 405		10 M / D D / Y Y Y Y Y
	City State Washington Dc DC	Zip Code 20002	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization I Jynes Greta	Name	Transaction ID: 4B10317.E25190 Date of Disbursement
	Mailing Address 3745 Gunston Rd		10  30  7  2010
	City State Alexandria VA	Zip Code 22302	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Name (Colin	Name	Transaction ID: 4B10317.E25191 Date of Disbursement
	Mailing Address 4137 4th Rd N		10 M / D D / Y Y Y Y Y
	City State Arlington VA	Zip Code 22203	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Name (Colin	Name	Transaction ID: 4B10317.E25209 Date of Disbursement
	Mailing Address 4137 4th Rd N		10 M / D D / Y Y Y Y Y
	City State Arlington VA	Zip Code 22203	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization It	Name	Transaction ID: 4B10317.E25195 Date of Disbursement
	Mailing Address 2730 Lorraine Circle		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Geneva IL	60134	20.00
<b>—</b>	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
{	SUBTOTAL of Disbursements This Page (optional)		0.00

0.00

c	SCHEDULE L-B (FEC Form 3X)		
	TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 314 / 534 (check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	Any Information copied from such Reports and Statements ma	v not be sold or used by any per	son for the purpose of soliciting contributions
	r for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Lee Craig	nme	Transaction ID: 4B10317.E25196 Date of Disbursement
	Mailing Address 2730 Lorraine Circle		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Geneva IL	Zip Code 60134	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>–</b> В.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25197 Date of Disbursement
٥.	Lee Craig  Mailing Address 2730 Lorraine Circle		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Geneva IL	60134	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Lee Craig	ame	Transaction ID: 4B10317.E25198 Date of Disbursement
	Mailing Address 2730 Lorraine Circle		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Geneva IL	Zip Code 60134	Amount of Each Disbursement this Period
	Geneva IL  Purpose of Disbursement	00134	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Kinsey Natalie	ame	Transaction ID: 4B10317.E25199 Date of Disbursement
	Mailing Address 304 E Harrison		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheaton IL	60187	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>—</b> Е.	Full Name (Last, First, Middle Initial) / Full Organization Na	nme	Transaction ID: 4B10317.E25200 Date of Disbursement
	Kinsey Natalie  Mailing Address 304 E Harrison		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheaton IL	60187	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)		0.00

	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 315 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
	OF LEVIN FUNDS		Aggregation rage	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statemer for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza Kinsey Natalie	ation Na	me	Transaction ID: 4B10317.E25219 Date of Disbursement
	Mailing Address 304 E Harrison			M M / D D / Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
	Wheaton I	L	60187	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25220 Date of Disbursement
	Mailing Address 304 E Harrison			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Wheaton I	L	60187	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25201 Date of Disbursement
	Mailing Address 1n051 Partridge Dr			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Wheaton I	L	60187	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25202 Date of Disbursement
	Mailing Address 1n051 Partridge Dr			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Wheaton I	L	60187	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25203 Date of Disbursement
	Borto Jack  Mailing Address 318 W Oak Ave			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	00		7: 0 1	Amount of Each Dishursoment this Deviced
	•	State L	Zip Code 60187	Amount of Each Disbursement this Period
		L	00107	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
г				
	SUBTOTAL of Disbursements This Page (optional)			0.00

6	CHEDITIET B (EEC Form 2V)	_		
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 316 / 534 (check only one)
	EMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
C	OF LEVIN FUNDS		Aggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
$\setminus$	NAME OF COMMITTEE (In Full)			
	Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Borto Jack	Nam	e	Transaction ID: 4B10317.E25204 Date of Disbursement
	Mailing Address 318 W Oak Ave			10 M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Wheaton IL		60187	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Borto Jack	Nam	e	Transaction ID: 4B10317.E25217 Date of Disbursement
	Mailing Address 318 W Oak Ave			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Wheaton IL		60187	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Borto Jack	Nam	e	Transaction ID: 4B10317.E25218 Date of Disbursement
	Mailing Address 318 W Oak Ave			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Wheaton IL		60187	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Fitzpatrick Mike	Nam	e	Transaction ID: 4B10317.E25205 Date of Disbursement
	Mailing Address 26w130 Wood Lark Dr			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Wheaton IL		60187	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Fitzpatrick Mike	Nam	e	Transaction ID: 4B10317.E25206 Date of Disbursement
	Mailing Address 26w130 Wood Lark Dr			10 D D / Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Wheaton IL		60187	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)			0.00

S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	_	LINE NUMBER: PAGE 317/534
П	TEMIZED DISBURSEMENTS		for each category of the	(cnec	ck only one)
C	OF LEVIN FUNDS		Aggregation Page		4a   4c   Lx.  5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and				the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party				
A.	Full Name (Last, First, Middle Initial) / Full Organization Fitzpatrick Mike	Nam	е	Т	ransaction ID: 4B10317.E25215 Date of Disbursement
	Mailing Address 26w130 Wood Lark Dr				10 M / D D V 2010 Y
	City State Wheaton IL		Zip Code 60187		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Fitzpatrick Mike	Nam	е	Т	ransaction ID: 4B10317.E25216 Date of Disbursement
	Mailing Address 26w130 Wood Lark Dr				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
	City State Wheaton IL		Zip Code 60187		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement				Account: LEVIN
	Memo: Generic Gotv Incent Gift Card				[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Pilcher Julie	Nam	e	Т	ransaction ID: 4B10317.E25207 Date of Disbursement
	Mailing Address 270w071 Lowden Ave				10 M / D D / Y Y Y Y Y Y
	City State Wheaton IL		Zip Code 60189		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Keleta Jen	Nam	е	Т	ransaction ID: 4B10317.E25210 Date of Disbursement
	Mailing Address 1705 S Nelson St				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \ Y$
	City State		Zip Code		Amount of Each Disbursement this Period
	Arlington VA		22204		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Crowcroft Harry	Nam	е	Т	ransaction ID: 4B10317.E25211 Date of Disbursement
	Mailing Address 1979 Tall Oaks Dr				10
	City State Aurora IL		Zip Code 60505		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		30000		
<b>—</b>	Memo: Generic Gotv Incent Gift Card			<b>I</b>	Account: LEVIN [MEMO ITEM]
{	SUBTOTAL of Disbursements This Page (optional)			<b>•</b>	0.00

_	OUEDINE L. D. (EEO E OV)		
	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 318 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	
(	OF LEVIN FUNDS	Aggregation age	4a 4c LXJ 5
	any Information copied from such Reports and Statements may refor commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Crowcroft Harry	ame	Transaction ID: 4B10317.E25212 Date of Disbursement
	Mailing Address 1979 Tall Oaks Dr		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Aurora IL	60505	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Coyle Kaity	ame	Transaction ID: 4B10317.E25213 Date of Disbursement
	Mailing Address 147 S Lorraine Rd		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheaton IL	60187	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Coyle Kaity	ame	Transaction ID: 4B10317.E25214 Date of Disbursement
	Mailing Address 147 S Lorraine Rd		10 M / B B / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheaton IL	60187	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Vankampen Meredith	ame	Transaction ID: 4B10317.E25221 Date of Disbursement
	Mailing Address 609 Fell St		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25222
E.	Plaza Caitlin		Date of Disbursement
	Mailing Address 98 E. Locust Apt 5		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
•	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b> 0.00

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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 319 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c x 5
_	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements m r for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Plaza Caitlin	Name	Transaction ID: 4B10317.E26253 Date of Disbursement
	Mailing Address 98 E. Locust Apt 5		111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Anderson Adrienne	Name	Transaction ID: 4B10317.E25223 Date of Disbursement
	Mailing Address 705 S. Franklin Ave Apt 3		10 M / 30 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Larson Andrew	Name	Transaction ID: 4B10317.E25608 Date of Disbursement
	Mailing Address 10245 Tybo Trail		10 M / 31 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Roscoe	61073	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Larson Andrew	Name	Transaction ID: 4B10317.E25609 Date of Disbursement
	Mailing Address 10245 Tybo Trail		10 M / 31 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Roscoe IL	61073	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25618 Date of Disbursement
	Larson Andrew		
	Mailing Address 10245 Tybo Trail		10 M 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Roscoe IL	Zip Code 61073	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
<b>—</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 320 / 534 (check only one)
	TEMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	4a 4c x 5
	Any Information copied from such Reports and Statements nor for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Larson Andrew	Name	Transaction ID: 4B10317.E26248 Date of Disbursement
	Mailing Address 10245 Tybo Trail		M M / D D / Y Y Y Y Y Y
	City State Roscoe IL	Zip Code 61073	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Larson Andrew	Name	Transaction ID: 4B10317.E26249 Date of Disbursement
	Mailing Address 10245 Tybo Trail		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Roscoe IL	Zip Code 61073	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	0.0.0	Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25224 Date of Disbursement
	Larson Andrew  Mailing Address 10245 Tybo Trail		10 M / D D / Y Y Y Y Y
	City State Roscoe IL	Zip Code 61073	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	01070	Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25225 Date of Disbursement
	Larson Andrew  Mailing Address 10245 Tybo Trail		10 M / D D / Y Y Y Y Y Y
	City State Roscoe IL	Zip Code 61073	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organization Larson Andrew	Name	Transaction ID: 4B10317.E25921 Date of Disbursement
	Mailing Address 10245 Tybo Trail		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Roscoe IL	Zip Code 61073	Amount of Each Disbursement this Period
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	010/3	Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

_	OUEDINE L. D. (EEO Forms OV)			
5	CHEDULE L-B (FEC Form 3X)	ι	Jse separate schedule(s)	FOR LINE NUMBER: PAGE 321 / 534
П	TEMIZED DISBURSEMENTS		or each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
Α	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Larson Andrew	Name		Transaction ID: 4B10317.E25922 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 10245 Tybo Trail			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Roscoe IL		61073	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Manno Andrew	Name		Transaction ID: 4B10317.E25226 Date of Disbursement
	Mailing Address 315 S. Fell Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Samuelson Sam	Name		<b>Transaction ID:</b> 4B10317.E25227 Date of Disbursement
	Mailing Address P.o. Box 55			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Clinton IL		61727	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Samuelson Sam	Name		Transaction ID: 4B10317.E25228 Date of Disbursement
	Mailing Address P.o. Box 55			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Clinton IL		61727	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Samuelson Sam	Name		Transaction ID: 4B10317.E25242 Date of Disbursement
	Mailing Address P.o. Box 55			10
	City State Clinton IL		Zip Code 61727	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		J., L.	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
[	SUBTOTAL of Disbursements This Page (optional)			0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 322 / 534 (check only one)
Α	ny Information copied from such Reports and Statements me for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party	, p	
Α.	Full Name (Last, First, Middle Initial) / Full Organization Namuelson Sam	Name	Transaction ID: 4B10317.E25244  Date of Disbursement
	Mailing Address P.o. Box 55		M M / B B / Y Y Y Y Y Y
	City State Clinton IL	Zip Code 61727	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Sikes Joel	Name	Transaction ID: 4B10317.E25616 Date of Disbursement
	Mailing Address 1204 N Madison St		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Bloomington IL	Zip Code 61701	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization N Sikes Joel	Name	Transaction ID: 4B10317.E25229 Date of Disbursement
	Mailing Address 1204 N Madison St		10 M / D D / Y Y Y Y Y
	City State Bloomington IL	Zip Code 61701	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Smith Anthony	Name	Transaction ID: 4B10317.E25230 Date of Disbursement
	Mailing Address 1567 N. College St		M M / D D / Y Y Y Y Y
	City State Decatur IL	Zip Code 62521	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization N Smith Anthony	Name	Transaction ID: 4B10317.E25231 Date of Disbursement
	Mailing Address 1567 N. College St		10
	City State Decatur IL	Zip Code 62521	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ţ	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 323 / 534
П	EMIZED DISBURSEMENTS		for each category of the	(check only one)
C	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statemer for commercial purposes, other than using the name a			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) 'Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Smith Anthony	ion Na	me	Transaction ID: 4B10317.E25245 Date of Disbursement
	Mailing Address 1567 N. College St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta Decatur IL	ate	Zip Code 62521	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizat Smith Anthony	ion Na	me	Transaction ID: 4B10317.E25243 Date of Disbursement
	Mailing Address 1567 N. College St			10 M / D D / Y Y Y Y Y Y
	City Sta Decatur IL	ate	Zip Code 62521	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organizat Kubic David	ion Na	me	Transaction ID: 4B10317.E25232 Date of Disbursement
	Mailing Address 138 E Beauford St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	ate	Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Kubic David	ion Na	me	Transaction ID: 4B10317.E25233 Date of Disbursement
	Mailing Address 138 E Beauford St			10 M / D D / Y Y Y Y Y
	•	ate	Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organizat Mattheeson John	ion Na	me	Transaction ID: 4B10317.E25234 Date of Disbursement
	Mailing Address 2007 Desoto Ct			10 M / D D / Y Y Y Y Y
	City Sta Pekin IL	ate	Zip Code 61554	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)			0.00

_	COUEDING L. D. (EEO Es OV)		
	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 324 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS	Aggregation age	4b 4d 4d
	Any Information copied from such Reports and Statements may for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Mattheeson John	ame	Transaction ID: 4B10317.E25615 Date of Disbursement
	Mailing Address 2007 Desoto Ct		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Pekin IL	61554	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Pohlman Dana	ame	Transaction ID: 4B10317.E25235 Date of Disbursement
	Mailing Address 98 W. Vernon Ave Apt 7		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Pohlman Dana	ame	Transaction ID: 4B10317.E25236 Date of Disbursement
	Mailing Address 98 W. Vernon Ave Apt 7		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Pohlman Dana	ame	Transaction ID: 4B10317.E25917 Date of Disbursement
	Mailing Address 98 W. Vernon Ave Apt 7		111 D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25918
E.	Pohlman Dana		Date of Disbursement
	Mailing Address 98 W. Vernon Ave Apt 7		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 325 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
	OF LEVIN FUNDS		Aggregation rage	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Kubik Andrew	Nam	е	Transaction ID: 4B10317.E25606 Date of Disbursement
	Mailing Address 138 E. Beaufort			10 M / D D / Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Kubik Andrew	Nam	e	Transaction ID: 4B10317.E25607 Date of Disbursement
	Mailing Address 138 E. Beaufort			10  31
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Kubik Andrew	Nam	е	Transaction ID: 4B10317.E25237 Date of Disbursement
	Mailing Address 138 E. Beaufort			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Kubik Andrew	Nam	е	Transaction ID: 4B10317.E25238 Date of Disbursement
	Mailing Address 138 E. Beaufort			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organization	Nam	е	Transaction ID: 4B10317.E25239 Date of Disbursement
	Hugdahl Molly  Mailing Address 504 S. Fell Apt 13			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement		<del>-</del>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00
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,	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 326 / 534
ı	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
	OF LEVIN FUNDS		Aggregation Page	4a 4c Lx 5
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Hugdahl Molly	n Nan	ne	Transaction ID: 4B10317.E26235 Date of Disbursement
	Mailing Address 504 S. Fell Apt 13			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	9	Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Tully Mary	n Nan	ne	Transaction ID: 4B10317.E25240 Date of Disbursement
	Mailing Address 206 W. Mulberry Apt 8			10 M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Souk Ashley	n Nan	ne	Transaction ID: 4B10317.E25241 Date of Disbursement
	Mailing Address 919 Wilkins Hall			M M / D D / Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Souk Ashley	n Nan	ne	Transaction ID: 4B10317.E25919 Date of Disbursement
	Mailing Address 919 Wilkins Hall			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25246
E.	Hartigan Alexander			Date of Disbursement
	Mailing Address 440 Kenilworth Ave			M M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Elmhurst IL	•	Zip Code 60126	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

_	CHEDITIEL B /EEC Form 2V)		
	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 327 / 534 (check only one)
П	TEMIZED DISBURSEMENTS	for each category of the	
C	OF LEVIN FUNDS	Aggregation Page	4a   4c   LX   5
	ny Information copied from such Reports and Statements of for commercial purposes, other than using the name and		erson for the purpose of soliciting contributions
$\setminus$	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Dolbeane Kristen	Name	Transaction ID: 4B10317.E25247 Date of Disbursement
	Mailing Address 515 Pickening		10 M / D D / Y Y Y Y Y
	Mailing Address S15 Fickering		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Scott Jason	Name	Transaction ID: 4B10317.E25248 Date of Disbursement
	Mailing Address 719 Wright Hall		10 30 Y Y Y Y Y Y
	7 TO Wright Hall		2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Byrne Nate	Name	Transaction ID: 4B10317.E25249 Date of Disbursement
	Mailing Address 301 Jefferson		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25250
D.	Waggoner John		Date of Disbursement
	Mailing Address 604 Dale		10 M / D 3 D / Y 2 0 1 0 Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25251
E.	Schottens Cody		Date of Disbursement
	Mailing Address 1031 Hewett Hall		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
T,	SUBTOTAL of Disbursements This Page (optional)		
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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 328 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
C	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements ma	y not be sold or used by any pe	rson for the purpose of soliciting contributions
	for commercial purposes, other than using the name and ad		
$\setminus$	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
<u></u>	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25252
A.	Wagner Joel		Date of Disbursement
	Mailing Address 711 Kingsley Ct		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25253
В.	Cahalan Bridget		Date of Disbursement
	Mailing Address 205 South Locust		10 30 Y Y Y Y Y
			Amount of Each Disbursement this Period
	City State Highland IL	Zip Code 62249	
		02249	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
_			
C.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25254 Date of Disbursement
	Cahalan Bridget		M M / D D / Y Y Y Y
	Mailing Address 205 South Locust		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Highland IL	62249	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25255 Date of Disbursement
D.	Cahalan Bridget		
	Mailing Address 205 South Locust		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Highland IL	62249	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25256
E.	Cahalan Bridget		Date of Disbursement
	Mailing Address 205 South Locust		10 30 / 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Highland IL	62249	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)		0.00
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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 329 / 534 (check only one)  4a 4c x 5 4d
	ny Information copied from such Reports and Stateme for commercial purposes, other than using the name			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza Cahalan Bridget	tion Nar	me	Transaction ID: 4B10317.E25257 Date of Disbursement
	Mailing Address 205 South Locust			10 M / D D / Y Y Y Y Y
	City S Highland II	tate	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza Cahalan Bridget	tion Nar	me	Transaction ID: 4B10317.E25258 Date of Disbursement
	Mailing Address 205 South Locust			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S Highland II	tate	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organiza Cahalan Bridget	tion Nar	me	Transaction ID: 4B10317.E25259 Date of Disbursement
	Mailing Address 205 South Locust			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S Highland II	tate	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiza Cahalan Bridget	tion Nar	me	Transaction ID: 4B10317.E25260 Date of Disbursement
	Mailing Address 205 South Locust			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S Highland II	tate	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organiza Cahalan Bridget	tion Nar	ne	Transaction ID: 4B10317.E25261 Date of Disbursement
	Mailing Address 205 South Locust			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	tate	Zip Code	Amount of Each Disbursement this Period
	Highland Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	<u>-</u> .	62249	Account: LEVIN [MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)			• 0.00

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S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	_	LINE NUMBER: PAGE 330 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(cne	ck only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page		4a   4c   XJ 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and				
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
Α.	Full Name (Last, First, Middle Initial) / Full Organization Cahalan Bridget	n Nam	ne	Т	Transaction ID: 4B10317.E25623 Date of Disbursement
	Mailing Address 205 South Locust				10 M / 31 / Y Y Y Y Y
	City State Highland IL	)	Zip Code 62249		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Cahalan Bridget	n Nam	ne	Т	ransaction ID: 4B10317.E25624 Date of Disbursement
	Mailing Address 205 South Locust				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} & \begin{smallmatrix} D & D \\ 3 & 1 \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix}$
	City State Highland IL	)	Zip Code 62249		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement				Account: LEVIN
	Memo: Generic Gotv Incent Gift Card				[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Cahalan Bridget	n Nam	пе	Т	ransaction ID: 4B10317.E25625 Date of Disbursement
	Mailing Address 205 South Locust				10 M / D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Highland IL	)	Zip Code 62249		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
<b>—</b> D.	Full Name (Last, First, Middle Initial) / Full Organization Cahalan Bridget	n Nam	ne	Т	ransaction ID: 4B10317.E25626 Date of Disbursement
	Mailing Address 205 South Locust				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 3 & 1 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} $
	City State Highland IL	)	Zip Code 62249		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
<u> —</u> Е.	Full Name (Last, First, Middle Initial) / Full Organization Cahalan Bridget	n Nam	ne	Т	ransaction ID: 4B10317.E25627 Date of Disbursement
	Mailing Address 205 South Locust				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State Highland IL	)	Zip Code 62249		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement				Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card				[MEMO ITEM]
- [ :	SUBTOTAL of Disbursements This Page (optional)			<b>•</b>	0.00

	ge# 11990321020			
I	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 331 / 534 (check only one)  4a 4c x 5
	ny Information copied from such Reports and Staten r for commercial purposes, other than using the nam			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organi. Cahalan Bridget	zation Na	me	Transaction ID: 4B10317.E25628 Date of Disbursement
	Mailing Address 205 South Locust			10 M / 31 / Y Y Y Y Y
	City Highland	State IL	Zip Code 62249	Amount of Each Disbursement this Period 20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi. Cahalan Bridget	zation Na	me	Transaction ID: 4B10317.E25629 Date of Disbursement
	Mailing Address 205 South Locust			10
	City Highland	State IL	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organi. Cahalan Bridget	zation Na	ime	Transaction ID: 4B10317.E25630 Date of Disbursement
	Mailing Address 205 South Locust			10 M / 31 / Y Y Y Y Y
	City Highland	State IL	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi. Cahalan Bridget	zation Na	ime	Transaction ID: 4B10317.E25631 Date of Disbursement
	Mailing Address 205 South Locust			10 M / 31 / Y Y Y Y Y
	City Highland	State IL	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organi. Cahalan Bridget	zation Na	me	Transaction ID: 4B10317.E25632 Date of Disbursement
	Mailing Address 205 South Locust			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State IL	Zip Code	Amount of Each Disbursement this Period
	Highland Purpose of Disbursement	IL	62249	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
- 1 :	<b>SUBTOTAL</b> of Disbursements This Page (optional)			0.00

	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 332 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
	OF LEVIN FUNDS		Aggregation Fage	4a 4c LXJ5
	ny Information copied from such Reports and State r for commercial purposes, other than using the nan			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organ Cahalan Bridget	ization Na	me	Transaction ID: 4B10317.E25633 Date of Disbursement
	Mailing Address 205 South Locust			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Highland	IL	62249	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Wagner Linda	ization Na	me	Transaction ID: 4B10317.E25262 Date of Disbursement
	Mailing Address 4322 Crossgate Drive			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61822	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organ Wagner Linda	ization Na	me	Transaction ID: 4B10317.E25263 Date of Disbursement
	Mailing Address 4322 Crossgate Drive			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61822	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B10317.E25264
D.	Wagner Linda			Date of Disbursement
	Mailing Address 4322 Crossgate Drive			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61822	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	me	Transaction ID: 4B10317.E25265 Date of Disbursement
	Wagner Linda  Mailing Address 4322 Crossgate Drive			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	Stata	Zin Codo	Amount of Each Disbursement this Period
	City Champaign	State IL	Zip Code 61822	20.00
	Purpose of Disbursement	IL.	01022	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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- 1	SUBTOTAL of Disbursements This Page (optional)	٠		0.00

	CHEDIII E I B /EEC Form 2V)	Г		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 333 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX   5
	ny Information copied from such Reports and Statement r for commercial purposes, other than using the name an			son for the purpose of soliciting contributions
L	NAME OF COMMITTEE (In Full)			
	Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Wagner Linda	n Nan	ne	Transaction ID: 4B10317.E25266 Date of Disbursement
	Mailing Address 4322 Crossgate Drive			10 M / D D / Y Y Y Y Y
	City Stat	e	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61822	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<del>-</del> В.	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25267 Date of Disbursement
	Mailing Address 801 West Delaware			10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Walling Address OUT West Delawate			10 30 2010
	City Stat	e	Zip Code	Amount of Each Disbursement this Period
	Urbana IL		61807	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25268 Date of Disbursement
	Mailing Address 801 West Delaware			M M / D D / Y Y Y Y Y Y
	City Stat	e	Zip Code	Amount of Each Disbursement this Period
	Urbana IL		61807	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25269
D.	Lash Kelly			Date of Disbursement
	Mailing Address 801 West Delaware			10 M / D D / Y Y Y Y Y Y
	City Stat	e	Zip Code	Amount of Each Disbursement this Period
	Urbana IL		61807	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25270
E.	Lash Kelly			Date of Disbursement
	Mailing Address 801 West Delaware			10
	City Stat	e	Zip Code	Amount of Each Disbursement this Period
	Urbana IL		61807	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00
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,	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 334 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
7	Any Information copied from such Reports and Statement or for commercial purposes, other than using the name are			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization	on Nan	ne	Transaction ID: 4B10317.E25271 Date of Disbursement
	Mailing Address 801 West Delaware			10 M / D D / Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Urbana IL		61807	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organizati	on Nan	ne	Transaction ID: 4B10317.E25272
В.	Vetter Daniel			Date of Disbursement
	Mailing Address 2202 Brownstone Court			10 M A A A A A A A A A A A A A A A A A A
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61822	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization	on Nan	ne	Transaction ID: 4B10317.E25273 Date of Disbursement
	Mailing Address 2202 Brownstone Court			10 M / D D / Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61822	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	on Nan	ne	Transaction ID: 4B10317.E25274 Date of Disbursement
	Mailing Address 2202 Brownstone Court			10 M / 30 / Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61822	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	on Nan	ne	Transaction ID: 4B10317.E25275
E.	Vetter Daniel			Date of Disbursement
	Mailing Address 2202 Brownstone Court			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61822	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 335 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Vetter Daniel	Nam	ne	Transaction ID: 4B10317.E25276 Date of Disbursement
	Mailing Address 2202 Brownstone Court			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	•	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61822	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Nam	ne	Transaction ID: 4B10317.E25277 Date of Disbursement
	Mailing Address 501 Village Park Way			10
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Savoy IL		61874	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Nam	ne	Transaction ID: 4B10317.E25278 Date of Disbursement
	Mailing Address 501 Village Park Way			10 M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Savoy IL		61874	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Nam	ie	Transaction ID: 4B10317.E25279 Date of Disbursement
	Mailing Address 501 Village Park Way			10 M / D D / Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Savoy IL		61874	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>—</b> Е.	Full Name (Last, First, Middle Initial) / Full Organization	Nam	ne	Transaction ID: 4B10317.E25280 Date of Disbursement
	Chestnut Chris  Mailing Address 501 Village Park Way			10
	City State		Zin Codo	Amount of Each Disbursement this Period
	Savoy IL	;	Zip Code 61874	20.00
	Purpose of Disbursement		J107 T	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Г	CURTOTAL of Dishum-amenda This Days (authors)			
- 1	<b>SUBTOTAL</b> of Disbursements This Page (optional)			0.00

_	COUEDING L. D. (EEO Farras OV)	_		,
	SCHEDULE L-B (FEC Form 3X)	ι	Jse separate schedule(s)	FOR LINE NUMBER: PAGE 336 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		or each category of the Aggregation Page	
(	OF LEVIN FUNDS	'	Aggregation Fage	4a 4c Lx 5
	any Information copied from such Reports and Statements report for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Name	,	Transaction ID: 4B10317.E25281 Date of Disbursement
	Mailing Address 501 Village Park Way			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Savoy IL		61874	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Name		Transaction ID: 4B10317.E25634 Date of Disbursement
	Mailing Address 501 Village Park Way			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Savoy IL		61874	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Name	,	Transaction ID: 4B10317.E25635 Date of Disbursement
	Mailing Address 501 Village Park Way			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Savoy IL		61874	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Name		Transaction ID: 4B10317.E25636 Date of Disbursement
	Mailing Address 501 Village Park Way			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Savoy		61874	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Chestnut Chris	Name		Transaction ID: 4B10317.E25637 Date of Disbursement
	Mailing Address 501 Village Park Way			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Savoy IL		61874	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a  4c  x 5 4d
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Chestnut Chris	lame	Transaction ID: 4B10317.E25638 Date of Disbursement
	Mailing Address 501 Village Park Way		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Savoy IL	Zip Code 61874	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Chestnut Chris	lame	Transaction ID: 4B10317.E25933 Date of Disbursement
	Mailing Address 501 Village Park Way		11
	City State Savoy IL	Zip Code 61874	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Chestnut Chris	lame	Transaction ID: 4B10317.E25934 Date of Disbursement
	Mailing Address 501 Village Park Way		11 01 7 2010
	City State Savoy IL	Zip Code 61874	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Chestnut Chris	lame	Transaction ID: 4B10317.E25935 Date of Disbursement
	Mailing Address 501 Village Park Way	1 1 M / D D / Y Y Y Y Y Y	
	City State Savoy IL	Zip Code 61874	Amount of Each Disbursement this Period
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	01074	Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E26262 Date of Disbursement
	Mailing Address 501 Village Park Way		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Savoy IL	Zip Code 61874	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ţ.	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

Ş	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 338 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	any Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ac		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Chestnut Chris	ame	Transaction ID: 4B10317.E26263 Date of Disbursement
	Mailing Address 501 Village Park Way		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Savoy IL	Zip Code 61874	Amount of Each Disbursement this Period 20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Chestnut Chris	ame	Transaction ID: 4B10317.E26264 Date of Disbursement
	Mailing Address 501 Village Park Way		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Savoy IL	61874	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Liberatore Amanda	ame	Transaction ID: 4B10317.E26269 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Liberatore Amanda	ame	Transaction ID: 4B10317.E26270 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]	
E.	Full Name (Last, First, Middle Initial) / Full Organization N Liberatore Amanda	ame	Transaction ID: 4B10317.E26271 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

,	COUEDING L. D. (EEO Es OV)		
	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 339 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the	
(	OF LEVIN FUNDS	Aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad-		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
	/ Illinois nepublican Farty		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	ame	Transaction ID: 4B10317.E26272 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	ame	Transaction ID: 4B10317.E25941 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	ame	Transaction ID: 4B10317.E25942 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	ame	Transaction ID: 4B10317.E25943 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25639
E.	Liberatore Amanda		Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
۲	CURTOTAL of Dishurasments This Dage (antique)		
- 1	SUBTOTAL of Disbursements This Page (optional)		0.00

_	COLEDING L. D. (EEO Forms OV)		
	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 340 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a  4c  5
(	OF LEVIN FUNDS	Aggregation rage	4b 4d 4d
	any Information copied from such Reports and Statements may or for commercial purposes, other than using the name and add		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	me	Transaction ID: 4B10317.E25640 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
_			Transaction ID: 4B10317.E25641
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	me	Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	me	Transaction ID: 4B10317.E25642 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	me	Transaction ID: 4B10317.E25282 Date of Disbursement
D.	Liberatore Amanda		
	Mailing Address 101 East Green Street, Apt#18		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	me	Transaction ID: 4B10317.E25283
E.	Liberatore Amanda		Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

(	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 341 / 534
I	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	Any Information copied from such Reports and Statements mayor for commercial purposes, other than using the name and add		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Liberatore Amanda	me	Transaction ID: 4B10317.E25284 Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25285
В.	Liberatore Amanda		Date of Disbursement
	Mailing Address 101 East Green Street, Apt#18	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Juhas Jackie	me	Transaction ID: 4B10317.E25286 Date of Disbursement
	Mailing Address 1134 Grandview Drive		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Juhas Jackie	me	Transaction ID: 4B10317.E25287 Date of Disbursement
	Mailing Address 1134 Grandview Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25288 Date of Disbursement
E.	Juhas Jackie		
	Mailing Address 1134 Grandview Drive		10 30 7 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
-	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

_	OUEDIUE L. D. (EEO Esses OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 342 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and State r for commercial purposes, other than using the nar			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Orgar Juhas Jackie	nization Na	me	Transaction ID: 4B10317.E25289 Date of Disbursement
	Mailing Address 1134 Grandview Drive			10 M / D D / Y Y Y Y Y
	City New Lenox	State IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Juhas Jackie	nization Na	me	Transaction ID: 4B10317.E25944 Date of Disbursement
	Mailing Address 1134 Grandview Drive			111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City New Lenox	State	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Orgar Juhas Jackie	nization Na	me	Transaction ID: 4B10317.E25945 Date of Disbursement
	Mailing Address 1134 Grandview Drive			M M / D D / Y Y Y Y Y
	City New Lenox	State IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Orgar Juhas Jackie	nization Na	me	Transaction ID: 4B10317.E25946 Date of Disbursement
	Mailing Address 1134 Grandview Drive			11 M M / D D / Y Y Y Y Y Y
	City New Lenox	State IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>Е</b> .	Full Name (Last, First, Middle Initial) / Full Orgar Juhas Jackie	nization Na	me	Transaction ID: 4B10317.E25947 Date of Disbursement
	Mailing Address 1134 Grandview Drive			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City New Lenox	State IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)	)		0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 343 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	Any Information copied from such Reports and Statements nor for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		
4	/ Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Juhas Jackie	Name	Transaction ID: 4B10317.E25644  Date of Disbursement
	Mailing Address 1134 Grandview Drive		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25645 Date of Disbursement
	Juhas Jackie		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1134 Grandview Drive		
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
_	Memo. Generic Goty incent Girt Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Juhas Jackie	Name	Transaction ID: 4B10317.E25646 Date of Disbursement
	Mailing Address 1134 Grandview Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Juhas Jackie	Name	Transaction ID: 4B10317.E25643 Date of Disbursement
	Mailing Address 1134 Grandview Drive		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E26273
E.	Juhas Jackie		Date of Disbursement
	Mailing Address 1134 Grandview Drive		111 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	New Lenox IL	60451	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
۲	SUBTOTAL of Disbursements This Page (optional)		• 0.00

	2011-0111-01-01			
S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 344 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5
	ny Information copied from such Reports and State r for commercial purposes, other than using the nan			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organ Juhas Jackie	ization Na	ame	Transaction ID: 4B10317.E26274 Date of Disbursement
	Mailing Address 1134 Grandview Drive			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City New Lenox	State	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>—</b> В.	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	ame	Transaction ID: 4B10317.E26275 Date of Disbursement
	Juhas Jackie  Mailing Address 1134 Grandview Drive			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City New Lenox	State IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	'L	00431	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organ Juhas Jackie	ization Na	ame	Transaction ID: 4B10317.E26276 Date of Disbursement
	Mailing Address 1134 Grandview Drive			111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	New Lenox	IL	60451	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Juhas Jackie	ization Na	ame	Transaction ID: 4B10317.E26277 Date of Disbursement
	Mailing Address 1134 Grandview Drive			11 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	New Lenox	IL	60451	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organ Juhas Jackie	ization Na	ame	Transaction ID: 4B10317.E26278 Date of Disbursement
	Mailing Address 1134 Grandview Drive			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City New Lenox	State IL	Zip Code 60451	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	IL	00701	
<b>-</b>	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
1	SUBTOTAL of Disbursements This Page (optional)			▶ 0.00

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S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE I		PAGE 345 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only	—	4c x 5
	OF LEVIN FUNDS		Aggregation Page		4a	4c Lx 5 4d
	ny Information copied from such Reports and Statements or for commercial purposes, other than using the name and				pose of solici	ting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party					
Α.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nam	ne	Date o	f Disburseme	
	Mailing Address 204 East Peabody Drive			11	0 2	2010
	City State		Zip Code	Amour	nt of Each Dis	bursement this Period
	Champaign IL		61820			20.00
	Purpose of Disbursement				nt: LEVIN	
_	Memo: Generic Gotv Incent Gift Card			[MEM	O ITEM]	
В.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nam	ne	Date o	f Disburseme	·
	Mailing Address 204 East Peabody Drive			11	0 2	2010
	City State		Zip Code	Amour	nt of Each Dis	bursement this Period
	Champaign IL		61820			20.00
	Purpose of Disbursement			Accou	nt: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEM	O ITEM]	
C.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nam	ne		f Disburseme	
	Mailing Address 204 East Peabody Drive			111	0 2	2010
	City State		Zip Code	Amour	nt of Each Dis	bursement this Period
	Champaign IL		61820			20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				nt: LEVIN O ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nan	ne		tion ID: 4E f Disburseme	110317.E25932 ent
	Mailing Address 204 East Peabody Drive			11	/ D D	Y 2010 Y
	City State		Zip Code	Amour	nt of Each Dis	bursement this Period
	Champaign IL		61820			20.00
	Purpose of Disbursement				nt: LEVIN	
_	Memo: Generic Gotv Incent Gift Card			[MEM	O ITEM]	
E.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nam	ne		ction ID: 4E f Disburseme	310317.E25647 ent
	Mailing Address 204 East Peabody Drive			10	/ D D D	2010
	City State		Zip Code	Amour	nt of Each Dis	sbursement this Period
	Champaign IL		61820			20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card				nt: LEVIN O ITEM]	
۲					O I I LIVI J	
- 1	SUBTOTAL of Disbursements This Page (optional)			•		0.00

5	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 346 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Vermillion Jake	ame	Transaction ID: 4B10317.E25648 Date of Disbursement
	Mailing Address 204 East Peabody Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
_			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Vermillion Jake	ame	Transaction ID: 4B10317.E25649 Date of Disbursement
	Mailing Address 204 East Peabody Drive		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Vermillion Jake	ame	Transaction ID: 4B10317.E25650 Date of Disbursement
	Mailing Address 204 East Peabody Drive		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Vermillion Jake	me	Transaction ID: 4B10317.E25948 Date of Disbursement
	Mailing Address 204 East Peabody Drive	1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25949 Date of Disbursement
⊏.	Vermillion Jake		
	Mailing Address 204 East Peabody Drive		11 01 7 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
-	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

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٤	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 347 / 534	
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5	
	OF LEVIN FUNDS		Aggregation Page	4a 4c 4c 4d 5	
	Any Information copied from such Reports and Statements rour for commercial purposes, other than using the name and				
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
A.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nam	е	Transaction ID: 4B10317.E25290 Date of Disbursement	
	Mailing Address 204 East Peabody Drive			10 M / D D / Y Y Y Y Y Y	
	City State		Zip Code	Amount of Each Disbursement this Period	_
	Champaign IL		61820	20.00	
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
В.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nam	е	Transaction ID: 4B10317.E25291 Date of Disbursement	
	Mailing Address 204 East Peabody Drive			10 30 / 2010	
	City State		Zip Code	Amount of Each Disbursement this Period	1
	Champaign IL		61820	20.00	
	Purpose of Disbursement			Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) / Full Organization Vermillion Jake	Nam	e	Transaction ID: 4B10317.E25292 Date of Disbursement	
	Mailing Address 204 East Peabody Drive			10 M / 30 / Y Y Y Y Y Y	
	City State		Zip Code	Amount of Each Disbursement this Period	1
	Champaign IL		61820	20.00	
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nam	e	Transaction ID: 4B10317.E25293 Date of Disbursement	
	Mailing Address 709 West Green			10 M / D D / Y Y Y Y Y	
	City State		Zip Code	Amount of Each Disbursement this Period	1
	Champaign IL		61801	20.00	
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
_	Full Name (Last, First, Middle Initial) / Full Organization	Nam	e	Transaction ID: 4B10317.E25294	
E.	Thompson Will			Date of Disbursement	
	Mailing Address 709 West Green			10 30 2010	
	City State Champaign IL		Zip Code 61801	Amount of Each Disbursement this Period 20.00	
	Purpose of Disbursement			Account: LEVIN	1
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
	SUBTOTAL of Disbursements This Page (optional)			0.00	Γ

_	COUEDING L. D. (EEO Es um OV)		
	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 348 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	
(	OF LEVIN FUNDS	Aggregation Fage	4a 4c LXJ5
	Any Information copied from such Reports and Statements mor for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Thompson Will	Name	Transaction ID: 4B10317.E25295 Date of Disbursement
	Mailing Address 709 West Green		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Thompson Will	Name	Transaction ID: 4B10317.E25296 Date of Disbursement
	Mailing Address 709 West Green		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Thompson Will	Name	Transaction ID: 4B10317.E25955 Date of Disbursement
	Mailing Address 709 West Green		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61801	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<del>-</del> D.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25956 Date of Disbursement
٥.	Thompson Will  Mailing Address 709 West Green		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61801	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N Thompson Will	Name	Transaction ID: 4B10317.E25957 Date of Disbursement
	Mailing Address 709 West Green		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
r	SUBTOTAL of Disbursements This Page (optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 349 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
Α	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
K	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
	Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nam	e	<b>Transaction ID:</b> 4B10317.E25958 Date of Disbursement
	Mailing Address 709 West Green			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nam	е	Transaction ID: 4B10317.E25653 Date of Disbursement
	·			10  31  Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 709 West Green			10 31 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nam	е	Transaction ID: 4B10317.E25654 Date of Disbursement
	Mailing Address 709 West Green			10 M / 31 / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Nam	e	Transaction ID: 4B10317.E25655
D.	Thompson Will			Date of Disbursement
	Mailing Address 709 West Green			10 M / 31 / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Nam	e	Transaction ID: 4B10317.E25656
E.	Thompson Will			Date of Disbursement
	Mailing Address 709 West Green			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Г	OUDTOTAL of Dishara areast. This Double is a			
- 1	SUBTOTAL of Disbursements This Page (optional)			0.00

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5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 350 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c 4d 5
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nan	ne	Transaction ID: 4B10317.E26284 Date of Disbursement
	Mailing Address 709 West Green			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nan	ne	Transaction ID: 4B10317.E26285 Date of Disbursement
	Mailing Address 709 West Green			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nan	ne	Transaction ID: 4B10317.E26286 Date of Disbursement
	Mailing Address 709 West Green			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Thompson Will	Nan	ne	Transaction ID: 4B10317.E26287 Date of Disbursement
	Mailing Address 709 West Green			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	Nan	ne	Transaction ID: 4B10317.E26288 Date of Disbursement
	Thompson Will			
	Mailing Address 709 West Green			11
	City State Champaign IL		Zip Code 61801	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 351 / 534 (check only one)  4a  4c  x 5
Ai	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Bishop Michael	ame	Transaction ID: 4B10317.E26289 Date of Disbursement
	Mailing Address 1208 West Church Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61821	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Bishop Michael	ame	Transaction ID: 4B10317.E26290 Date of Disbursement
	Mailing Address 1208 West Church Street		111
	City State Champaign IL	Zip Code 61821	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Bishop Michael	ame	Transaction ID: 4B10317.E26291 Date of Disbursement
	Mailing Address 1208 West Church Street		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61821	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
 D.	Full Name (Last, First, Middle Initial) / Full Organization Na Bishop Michael	ame	Transaction ID: 4B10317.E25657 Date of Disbursement
	Mailing Address 1208 West Church Street		10 M / 31 / Y Y Y Y Y
	City State Champaign IL	Zip Code 61821	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Bishop Michael	ame	Transaction ID: 4B10317.E25658 Date of Disbursement
	Mailing Address 1208 West Church Street		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL Purpose of Disbursement	61821	Account: LEVIN
<b>—</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 352 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the	
	OF LEVIN FUNDS	Aggregation Page	4a 4c Lx 5
	any Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ac		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Z	minois republican rarry		
A.	Full Name (Last, First, Middle Initial) / Full Organization No Bishop Michael	ame	Transaction ID: 4B10317.E25659 Date of Disbursement
	Mailing Address 1208 West Church Street		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61821	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Bishop Michael	ame	Transaction ID: 4B10317.E25660 Date of Disbursement
	Mailing Address 1208 West Church Street		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61821	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ama	Transaction ID: 4B10317.E25959
C.	Bishop Michael	ane	Date of Disbursement
	Mailing Address 1208 West Church Street		111
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61821	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25960
D.	Bishop Michael		Date of Disbursement
	Mailing Address 1208 West Church Street		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61821	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25961
E.	Bishop Michael		Date of Disbursement
	Mailing Address 1208 West Church Street		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61821	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC F	orm 3X)		FOR LINE NUMBER: PAGE 353 / 534
	EMIZED DISBURSEME		Use separate schedule(s) for each category of the	(check only one)
	F LEVIN FUNDS	-1110	Aggregation Page	4a 4c x 5 4b 4d
				rson for the purpose of soliciting contributions to solicit contributions from such committee
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initia Bishop Michael	l) / Full Organization Na	ame	Transaction ID: 4B10317.E25297 Date of Disbursement
	Mailing Address 1208 West C	Church Street		M M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61821	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Ca	ırd		[MEMO ITEM]
_	Full Name (Last, First, Middle Initia	l) / Full Organization Na	ame	Transaction ID: 4B10317.E25298
B.	Bishop Michael			Date of Disbursement
	Mailing Address 1208 West C	Church Street		10 M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61821	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Ca	urd		[MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initia	l) / Full Organization Na	ame	Transaction ID: 4B10317.E25299 Date of Disbursement
0.	Bishop Michael			
	Mailing Address 1208 West C	Church Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61821	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Ca	ırd		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initia Bishop Michael	ıl) / Full Organization Na	ame	Transaction ID: 4B10317.E25300 Date of Disbursement
		Church Street		10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61821	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Ca	urd		[MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initia Kozlowski Mike	l) / Full Organization Na	ame	Transaction ID: 4B10317.E25301 Date of Disbursement
		Locust, Spt#313		10 30 / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Goty Incent Gift Ca	ırd		IMEMO ITEMI

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SUBTOTAL of Disbursements This Page (optional) ......

TOTAL This Period (last page this line number only) ......

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Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E25967  D. Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Transaction ID: 4B10317.E25967  Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	_			
Transaction ID: 4810317.E25302  Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee in the purpose of solicting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee in the purpose of solicting contributions from such committee in solicit contributions   Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, F		•	Use separate schedule(s)	
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Illinois Republican Party   Illinois Republican Party   Full Name (Last, First, Middle Initial) / Full Organization Name				rson for the purpose of soliciting contributions
A. Kozlowski Milke Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Purpose of Disbursement IIL 61820  B. Kozlowski Milke Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Full Name (Last, First, Middle Initial) / Full Organization Name Count: LEVIN IMEMO ITEM]  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Incent Gift Card  City State Zip Code Champaign IL 61820  Purpose of Disbursement Incent Intent Incent Intent Incent Intent Incent Intent Incent Intent Intent Incent Intent I		` '		
Mailing Address 1007 South Locust, Spt#313  City State Zip Code (Champaign IL 61820 20.00)  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  B. Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code (Champaign IL 61820 20.00)  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  C. Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code (Champaign IL 61820 20.00)  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  C. Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code (Champaign IL 61820 20.00)  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  D. Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code (Champaign IL 61820 20.00)  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  D. Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820 20.00  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  E. Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820 20.00  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820 20.00  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820 20.00  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820 20.00  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820 20.00  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Champaign IL 61820 20.00  P	A.	, , , ,	ame	Date of Disbursement
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Date of Disbursement  Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Kozlowski Mike Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Amount of Each Disbursement this Period  [MEMO ITEM]  Transaction ID: 4B10317.E25968 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		•		
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Memo: Generic Gotv Incent Gift Card  [MEMO ITEM]  Full Name (Last, First, Middle Initial) / Full Organization Name Kozlowski Mike  Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  [MEMO ITEM]  Transaction ID: 4B10317.E25968  Date of Disbursement  Amount of Each Disbursement this Period  20.00  Account: LEVIN  [MEMO ITEM]		Champaign IL	61820	20.00
E. Kozlowski Mike  Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Date of Disbursement  Amount of Each Disbursement this Period  20.00  Account: LEVIN [MEMO ITEM]		·		
Mailing Address 1007 South Locust, Spt#313  City State Zip Code Champaign IL 61820  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]	E.		ame	
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Memo: Generic Gotv Incent Gift Card [MEMO ITEM]		•	-	20.00
Memo: Generic Gotv Incent Gift Card  [MEMO ITEM]		Purpose of Disbursement		Account: LEVIN
SUBTOTAL of Disbursements This Page (optional)		Memo: Generic Gotv Incent Gift Card		
	Γ	SUBTOTAL of Disbursements This Page (optional)		0.00

S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 355 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
	OF LEVIN FUNDS	Aggregation Page	4a 4c 15 4b 4d
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	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Kozlowski Mike	ame	<b>Transaction ID:</b> 4B10317.E25969 Date of Disbursement
	Mailing Address 1007 South Locust, Spt#313		M M / D D / Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Kozlowski Mike	ame	Transaction ID: 4B10317.E26295 Date of Disbursement
	Mailing Address 1007 South Locust, Spt#313		1 1 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Kozlowski Mike	ame	Transaction ID: 4B10317.E26296 Date of Disbursement
	Mailing Address 1007 South Locust, Spt#313		111 / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL  Purpose of Disbursement	61820	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Kozlowski Mike	ame	Transaction ID: 4B10317.E26297 Date of Disbursement
	Mailing Address 1007 South Locust, Spt#313		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL  Purpose of Disbursement	61820	20.00
_	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Kozlowski Mike	ame	<b>Transaction ID:</b> 4B10317.E25665 Date of Disbursement
	Mailing Address 1007 South Locust, Spt#313		10 / 31 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

ıııaç	Je# 11990327031			
П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a 4c 4c 4d 4d 4d
	ny Information copied from such Reports and State for commercial purposes, other than using the nar			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Kozlowski Mike	nization Na	ame	Transaction ID: 4B10317.E25666 Date of Disbursement
	Mailing Address 1007 South Locust, Spt	#313		10 M / 31 / Y Y Y Y Y
	City Champaign	State IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Kozlowski Mike	nization Na	ame	Transaction ID: 4B10317.E25667 Date of Disbursement
	Mailing Address 1007 South Locust, Spt	#313		10
	City Champaign	State IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>C</b> .	Full Name (Last, First, Middle Initial) / Full Organ Knecht Julie	nization Na	ame	Transaction ID: 4B10317.E25668 Date of Disbursement
	Mailing Address 565 Red Barn Lane			10 M / 31 / Y Y Y Y Y
	City Barrington	State IL	Zip Code 60010	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Knecht Julie	nization Na	ame	Transaction ID: 4B10317.E25669 Date of Disbursement
	Mailing Address 565 Red Barn Lane			10 M / 31 / Y Y Y Y Y
	City Barrington	State IL	Zip Code 60010	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organ Knecht Julie	nization Na	ame	Transaction ID: 4B10317.E25670 Date of Disbursement
	Mailing Address 565 Red Barn Lane			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Barrington	IL	60010	20.00
<b>—</b>	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional	)		0.00

S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 357 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organi Knecht Julie	zation Na	me	Transaction ID: 4B10317.E25671 Date of Disbursement
	Mailing Address 565 Red Barn Lane			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Barrington	IL	60010	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Knecht Julie	zation Na	me	Transaction ID: 4B10317.E26298 Date of Disbursement
	Mailing Address 565 Red Barn Lane			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Barrington	IL	60010	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organi Knecht Julie	zation Na	me	Transaction ID: 4B10317.E26299 Date of Disbursement
	Mailing Address 565 Red Barn Lane			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Barrington	IL	60010	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>D</b> .	Full Name (Last, First, Middle Initial) / Full Organi Knecht Julie	zation Na	me	Transaction ID: 4B10317.E26300 Date of Disbursement
	Mailing Address 565 Red Barn Lane			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Barrington	IL	60010	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organi	zation Na	me	Transaction ID: 4B10317.E25970
E.	Knecht Julie			Date of Disbursement
	Mailing Address 565 Red Barn Lane			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Barrington	State IL	Zip Code 60010	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		00010	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	CURTOTAL of Distance and Till Day (1911)			
- [ '	SUBTOTAL of Disbursements This Page (optional)			0.00

Ş	SCHEDULE L-B (FEC Form 3X)	Г	Jse separate schedule(s)	FOR LINE NUMBER: PAGE 358 / 534
ľ	TEMIZED DISBURSEMENTS	f	or each category of the	(check only one)
(	OF LEVIN FUNDS	/	Aggregation Page	4a 4c x 5
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Knecht Julie	Name	,	Transaction ID: 4B10317.E25971 Date of Disbursement
	Mailing Address 565 Red Barn Lane			M M / D D / Y Y Y Y Y Y
	City State Barrington IL		Zip Code 60010	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Knecht Julie	Name	,	Transaction ID: 4B10317.E25972 Date of Disbursement
	Mailing Address 565 Red Barn Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Barrington IL Purpose of Disbursement		60010	20.00
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Knecht Julie	Name	,	Transaction ID: 4B10317.E25973 Date of Disbursement
	Mailing Address 565 Red Barn Lane			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Barrington IL		60010	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Knecht Julie	Name		Transaction ID: 4B10317.E25304 Date of Disbursement
	Mailing Address 565 Red Barn Lane			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Barrington IL		Zip Code 60010	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Knecht Julie	Name	1	Transaction ID: 4B10317.E25305 Date of Disbursement
	Mailing Address 565 Red Barn Lane			10 30 / 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Barrington IL		60010	20.00
<b>8</b>	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

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	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 359 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
C	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and		erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Knecht Julie	Name	Transaction ID: 4B10317.E25306 Date of Disbursement
	Mailing Address 565 Red Barn Lane		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Barrington IL	60010	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Roe Hannah	Name	Transaction ID: 4B10317.E25307 Date of Disbursement
	Mailing Address 611 East Daniel		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Roe Hannah	Name	Transaction ID: 4B10317.E25308 Date of Disbursement
	Mailing Address 611 East Daniel		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25309
D.	Roe Hannah		Date of Disbursement
	Mailing Address 611 East Daniel		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Leat First Middle Initial) / Full Oversis-tion	Nomo	Transaction ID: 4B10317.E26313
E.	Full Name (Last, First, Middle Initial) / Full Organization Roe Hannah	name	Date of Disbursement
	Mailing Address 611 East Daniel		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code	Amount of Each Disbursement this Period
	<u>   9</u>	61820	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
٦	CURTOTAL of Disburgoments This Base (antional)		
13	SUBTOTAL of Disbursements This Page (optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)		Jse separate schedule(s)	FOR LINE NUMBER: PAGE 360 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		or each category of the	
(	OF LEVIN FUNDS	"	aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Statements mor for commercial purposes, other than using the name and a			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization N Roe Hannah	Name		Transaction ID: 4B10317.E26314 Date of Disbursement
	Mailing Address 611 East Daniel			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61820	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Roe Hannah	Name		<b>Transaction ID:</b> 4B10317.E26315 Date of Disbursement
	Mailing Address 611 East Daniel			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61820	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N	Name		Transaction ID: 4B10317.E25681 Date of Disbursement
	Mailing Address 611 East Daniel			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	Name		Transaction ID: 4B10317.E25682 Date of Disbursement
D.	Roe Hannah			
	Mailing Address 611 East Daniel			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization	Name		Transaction ID: 4B10317.E25987 Date of Disbursement
	Roe Hannah  Mailing Address 611 East Daniel			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61820	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 361 / 534
	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
		Aggregation Page	4a 4c x 5
	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
K	NAME OF COMMITTEE (In Full)	areas ar arry pointed committee	
	Illinois Republican Party		
K	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25988
Α.	Roe Hannah		Date of Disbursement
	Mailing Address 611 East Daniel		M M / D D / Y Y Y Y Y Y
	Oth.	7in Cada	Amount of Each Disbursement this Period
	City State	Zip Code	
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25989 Date of Disbursement
	Roe Hannah		M M / D D / Y Y Y Y
	Mailing Address 611 East Daniel		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Goty Incent Gift Card		[MEMO ITEM]
_			
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Roe Hannah	ame	Transaction ID: 4B10317.E25990 Date of Disbursement
			11 01 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 611 East Daniel		
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	Full Name (Least First Middle Initial) / Full Organization No		Transaction ID: 4B10317.E25991
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Johnsen Jane	ame	Date of Disbursement
			M M / D D / Y Y Y Y
	Mailing Address 611 East Daniel Street		11 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	E II Nove (Leas First Middle Leith) / E II Over eigelier N		Transaction ID: 4B10317.E25992
E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Date of Disbursement
	Johnsen Jane		
	Mailing Address 611 East Daniel Street		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN
F	Monte. denote deta moont dirt dard		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 362 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the	
(	OF LEVIN FUNDS		Aggregation Page	4a 4c LXJ 5
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Z				T .: ID 4D40047 F05000
A.	Full Name (Last, First, Middle Initial) / Full Organi Johnsen Jane	zation Na	me	Transaction ID: 4B10317.E25993 Date of Disbursement
	Mailing Address 611 East Daniel Street			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Johnsen Jane	zation Na	me	Transaction ID: 4B10317.E25994 Date of Disbursement
	Mailing Address 611 East Daniel Street			111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement		01020	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	E. II. Novo (Look Elvi Middle 1974) / Evil Ovo el	NI-		Transaction ID: 4B10317.E25683
C.	Full Name (Last, First, Middle Initial) / Full Organi Johnsen Jane	zation ina	me	Date of Disbursement
	Mailing Address 611 East Daniel Street			10 31 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi Johnsen Jane	zation Na	me	Transaction ID: 4B10317.E25684 Date of Disbursement
	Mailing Address 611 East Daniel Street			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organi	zation Na	mα	Transaction ID: 4B10317.E25685
E.	Johnsen Jane	Zalion i va	inc	Date of Disbursement
	Mailing Address 611 East Daniel Street			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement		<del>-</del>	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_				
- [ -	<b>SUBTOTAL</b> of Disbursements This Page (optional)			0.00

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 363 / 534
П	EMIZED DISBURSEMENTS		for each category of the	(check only one)
C	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Johnsen Jane	Transaction ID: 4B10317.E26316 Date of Disbursement		
	Mailing Address 611 East Daniel Street	111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Champaign IL	е	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	Account: LEVIN [MEMO ITEM]		
В.	Full Name (Last, First, Middle Initial) / Full Organization Johnsen Jane	n Name	9	Transaction ID: 4B10317.E26317 Date of Disbursement
	Mailing Address 611 East Daniel Street			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	е	Zip Code 61820	Amount of Each Disbursement this Period
	Champaign IL Purpose of Disbursement		61620	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]		
C.	Full Name (Last, First, Middle Initial) / Full Organization Johnsen Jane	n Name	9	Transaction ID: 4B10317.E26318 Date of Disbursement
	Mailing Address 611 East Daniel Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Champaign IL Purpose of Disbursement		61820	20.00
_	Memo: Generic Gotv Incent Gift Card	Account: LEVIN [MEMO ITEM]		
D.	Full Name (Last, First, Middle Initial) / Full Organization Johnsen Jane	Transaction ID: 4B10317.E25310 Date of Disbursement		
	Mailing Address 611 East Daniel Street			10 M / D D / Y Y Y Y Y Y
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Champaign IL Purpose of Disbursement		61820	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]		
E.	Full Name (Last, First, Middle Initial) / Full Organization Johnsen Jane	n Name	9	Transaction ID: 4B10317.E25311 Date of Disbursement
	Mailing Address 611 East Daniel Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

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S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 364 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a   4c   1x   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	<b>Transaction ID:</b> 4B10317.E25312 Date of Disbursement
	Mailing Address 4506 Stonebridge		M M / D D / Y Y Y Y Y
	City State Champaign IL	Zip Code 61822	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	Transaction ID: 4B10317.E25313 Date of Disbursement
	Mailing Address 4506 Stonebridge		10
	City State Champaign IL	Zip Code 61822	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	Transaction ID: 4B10317.E26321 Date of Disbursement
	Mailing Address 4506 Stonebridge		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61822	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	Transaction ID: 4B10317.E26322 Date of Disbursement
	Mailing Address 4506 Stonebridge		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61822	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	Transaction ID: 4B10317.E26323 Date of Disbursement
	Mailing Address 4506 Stonebridge		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61822	Amount of Each Disbursement this Period
	Purpose of Disbursement	01022	20.00
<b>-</b>	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

lmaç	ge# 11990327060		
S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 365 / 534
IП	EMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
	OF LEVIN FUNDS	Aggregation Fage	4a 4c 1x 5 4b 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	Transaction ID: 4B10317.E26000 Date of Disbursement
	Mailing Address 4506 Stonebridge	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Champaign IL	Zip Code 61822	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	Transaction ID: 4B10317.E26001 Date of Disbursement
	Mailing Address 4506 Stonebridge		1 1 D D / Y Y Y Y Y
	City State Champaign IL	Zip Code 61822	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Ruggles Geno	ame	Transaction ID: 4B10317.E26002 Date of Disbursement
	Mailing Address 4506 Stonebridge		111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61822	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	01022	Account: LEVIN [MEMO ITEM]
 D.	Full Name (Last, First, Middle Initial) / Full Organization Na Hong Christina	ame	Transaction ID: 4B10317.E26009 Date of Disbursement
	Mailing Address 202 East Peabody		1 1 M / D D / Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61801	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26010 Date of Disbursement
	Hong Christina  Mailing Address 202 East Peabody		11 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61801	20.00
<b>.</b>	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	_	R LINE NUMBER: PAGE 366 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(cne	eck only one)  4a 4c x 5
	OF LEVIN FUNDS		Aggregation Page		4a 4c 1 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and				the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
Α.	Full Name (Last, First, Middle Initial) / Full Organization Hong Christina	Nan	ne	1	Transaction ID: 4B10317.E26011 Date of Disbursement
	Mailing Address 202 East Peabody				$\begin{bmatrix} M & M & M \\ 1 & 1 & M \end{bmatrix} / \begin{bmatrix} D & D \\ 0 & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State Champaign IL		Zip Code 61801		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Hong Christina	Nan	ne	1	Fransaction ID: 4B10317.E26330 Date of Disbursement
	Mailing Address 202 East Peabody				$\begin{bmatrix} M & M \\ 1 & 1 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 0 & 2 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix} \ $
	City State Champaign IL		Zip Code 61801		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
<b>-</b> с.	Full Name (Last, First, Middle Initial) / Full Organization	Nan	ne	1	Fransaction ID: 4B10317.E26331 Date of Disbursement
	Hong Christina  Mailing Address 202 East Peabody				$\begin{bmatrix}\begin{smallmatrix}M&M&M\\1&1&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\0&2\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}$
	City State		Zip Code		Amount of Each Disbursement this Period
	Champaign IL		61801		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Hong Christina	Nan	ne	1	Fransaction ID: 4B10317.E25691 Date of Disbursement
	Mailing Address 202 East Peabody				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 3 & 1 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State		Zip Code		Amount of Each Disbursement this Period
	Champaign IL Purpose of Disbursement		61801		20.00
	Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Hong Christina	Nan	ne	٦	Fransaction ID: 4B10317.E25692 Date of Disbursement
	Mailing Address 202 East Peabody				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 3 & 1 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State		Zip Code		Amount of Each Disbursement this Period
	Champaign IL Purpose of Disbursement		61801		20.00
_	Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			<b>•</b>	0.00

_	OUEDINE L. D. (EEO E OV)	_		
S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 367 / 534
П	EMIZED DISBURSEMENTS		for each category of the	(check only one)
	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
_				4b 4d
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizatio Hong Christina	n Name	Э	Transaction ID: 4B10317.E25693 Date of Disbursement
	Mailing Address 202 East Peabody	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State	Э	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last First Middle Initial) / Full Organization	n Name		Transaction ID: 4B10317.E25314
В.	Full Name (Last, First, Middle Initial) / Full Organizatio	n ivame	9	Date of Disbursement
	Hong Christina	10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 202 East Peabody			10 30 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL	•	61801	20.00
	Purpose of Disbursement		01001	
	Memo: Generic Gotv Incent Gift Card	Account: LEVIN		
_	Werne. deficite doty moent ant data			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organizatio	n Name	e	Transaction ID: 4B10317.E25315 Date of Disbursement
	Vachaparambil Jerry	10  30  Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Mailing Address 245 East Niagara Ave			10 30 2010
	City State	Э	Zip Code	Amount of Each Disbursement this Period
	Elmhurst IL		60126	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizatio	n Name	Э	Transaction ID: 4B10317.E25316 Date of Disbursement
	Vachaparambil Jerry			M M / D D / Y Y Y Y
	Mailing Address 245 East Niagara Ave			10 30 2010
	City State	Э	Zip Code	Amount of Each Disbursement this Period
	Elmhurst IL		60126	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organizatio	n Name	2	Transaction ID: 4B10317.E25317
E.	Vachaparambil Jerry	ii i taiii		Date of Disbursement
	Mailing Address 245 East Niagara Ave	10 / 30 / Y Y Y Y Y Y		
	Mailing Address 243 East Niagara Ave			10 30 2010
	City State	Э	Zip Code	Amount of Each Disbursement this Period
	Elmhurst IL		60126	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	CURTOTAL of Dishuse secreta Title D /			
۱۶	SUBTOTAL of Disbursements This Page (optional)			0.00
T,	FOTAL This Period (last page this line number only)			<b>•</b>
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 368 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX   5 4b   4d
	ny Information copied from such Reports and Statements r r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Vachaparambil Jerry	Nam	е	Transaction ID: 4B10317.E25318 Date of Disbursement
	Mailing Address 245 East Niagara Ave			10 M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Elmhurst IL		60126	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Vachaparambil Jerry	Nam	е	Transaction ID: 4B10317.E25319 Date of Disbursement
	Mailing Address 245 East Niagara Ave			10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Elmhurst IL		60126	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Vachaparambil Jerry	Nam	е	Transaction ID: 4B10317.E25320 Date of Disbursement
	Mailing Address 245 East Niagara Ave			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Elmhurst IL		60126	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Vachaparambil Jerry	Nam	е	Transaction ID: 4B10317.E25321 Date of Disbursement
	Mailing Address 245 East Niagara Ave			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Elmhurst IL		60126	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organization	Nam	e	Transaction ID: 4B10317.E25322 Date of Disbursement
	Bizios Alexandra  Mailing Address 202 East Peabody Drive			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Cit.		Zin Cada	Amount of Each Disbursement this Period
	City State Champaign IL		Zip Code 60540	20.00
	Purpose of Disbursement		00070	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
۲				
- 1	SUBTOTAL of Disbursements This Page (optional)			0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 369 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
(	OF LEVIN FUNDS		Aggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Bizios Alexandra	Nam	е	Transaction ID: 4B10317.E25323 Date of Disbursement
	Mailing Address 202 East Peabody Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Bizios Alexandra	Nam	е	Transaction ID: 4B10317.E25324 Date of Disbursement
	Mailing Address 202 East Peabody Drive			10
	City State	!	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Bizios Alexandra	Nam	е	Transaction ID: 4B10317.E25325 Date of Disbursement
	Mailing Address 202 East Peabody Drive			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	Nam	е	Transaction ID: 4B10317.E25326 Date of Disbursement
٥.	Bizios Alexandra			M M / D D / Y Y Y Y
	Mailing Address 202 East Peabody Drive			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Bizios Alexandra	Nam	е	Transaction ID: 4B10317.E25694 Date of Disbursement
	Mailing Address 202 East Peabody Drive			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

_	SOUEDINE L. D. (EEO E OV)	_		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 370 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the	
	OF LEVIN FUNDS	'	Aggregation Page	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Statements nor for commercial purposes, other than using the name and a			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization	Name	)	Transaction ID: 4B10317.E25695 Date of Disbursement
	Mailing Address 202 East Peabody Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<del>-</del> В.	Full Name (Last, First, Middle Initial) / Full Organization	Name	)	Transaction ID: 4B10317.E25696 Date of Disbursement
	Bizios Alexandra			10 31 Y Y Y Y Y Y Y Y
	Mailing Address 202 East Peabody Drive			10 31 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Bizios Alexandra	Name	•	Transaction ID: 4B10317.E25697 Date of Disbursement
	Mailing Address 202 East Peabody Drive			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Bizios Alexandra	Name	2	Transaction ID: 4B10317.E25698 Date of Disbursement
	Mailing Address 202 East Peabody Drive			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization Bizios Alexandra	Name	)	Transaction ID: 4B10317.E26014 Date of Disbursement
	Mailing Address 202 East Peabody Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60540	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 371 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
C	OF LEVIN FUNDS	Aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E26023 Date of Disbursement
	Mailing Address 802 N Cheney		M M / D D / Y Y Y Y Y Y
	City State Taylorville IL	Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25699 Date of Disbursement
	Mailing Address 802 N Cheney		1 0 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Taylorville IL	Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25700 Date of Disbursement
	Mailing Address 802 N Cheney		10 M / 31 / Y Y Y Y Y Y
	City State Taylorville IL	Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E26334 Date of Disbursement
	Mailing Address 802 N Cheney		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Taylorville IL	Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	<b>V</b>	Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E26335 Date of Disbursement
	Mailing Address 802 N Cheney		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Taylorville IL	Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
1 :	SUBTOTAL of Disbursements This Page (optional)		0.00

5	SCHEDULE L-B (FEC Form 3X)	116	se separate schedule(s)	FOR LINE NUMBER: PAGE 372 / 534
l.	TEMIZED DISBURSEMENTS	fo	r each category of the	(check only one)
(	OF LEVIN FUNDS	Αį	ggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements r r for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Farris Bob	Name		Transaction ID: 4B10317.E25327 Date of Disbursement
	Mailing Address 802 N Cheney			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Taylorville IL		Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Farris Bob	Name		Transaction ID: 4B10317.E25328 Date of Disbursement
	Mailing Address 802 N Cheney			10 M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Taylorville IL		62568	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Farris Bob	Name		<b>Transaction ID:</b> 4B10317.E25329 Date of Disbursement
	Mailing Address 802 N Cheney			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Taylorville IL		62568	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Farris Bob	Name		<b>Transaction ID:</b> 4B10317.E26024 Date of Disbursement
	Mailing Address 802 N Cheney			M M / D D / Y Y Y Y Y Y
	City State Taylorville IL		Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Farris Bob	Name		Transaction ID: 4B10317.E26025 Date of Disbursement
	Mailing Address 802 N Cheney			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Taylorville IL		62568	20.00
<b>1</b> —	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

	SCHEDULE L-B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 373 / 534 (check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Mckechen Ron	ame	Transaction ID: 4B10317.E26026 Date of Disbursement
	Mailing Address 4032 Hazelbrook Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL Purpose of Disbursement	Zip Code 62711	Amount of Each Disbursement this Period 20.00
_	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Mckechen Ron	ame	Transaction ID: 4B10317.E26027 Date of Disbursement
	Mailing Address 4032 Hazelbrook Drive		11 01 2010
	City State Springfield IL	Zip Code 62711	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E26028 Date of Disbursement
	Mckechen Ron  Mailing Address 4032 Hazelbrook Drive		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62711	Amount of Each Disbursement this Period
	Springfield IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	02/11	Account: LEVIN [MEMO ITEM]
<del>-</del> D.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25330 Date of Disbursement
	Mckechen Ron  Mailing Address 4032 Hazelbrook Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62711	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<del>-</del> Е.	Full Name (Last, First, Middle Initial) / Full Organization N Mckechen Ron	ame	Transaction ID: 4B10317.E25331 Date of Disbursement
D.	Mailing Address 4032 Hazelbrook Drive		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL Purpose of Disbursement	62711	Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

,	COUEDINE L. D. (EEO Es um OV)	r		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 374 / 534 (check only one)
I	TEMIZED DISBURSEMENTS		for each category of the	
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Statemor for commercial purposes, other than using the name			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiz Mckechen Ron	ation Nar	me	Transaction ID: 4B10317.E25332 Date of Disbursement
	Mailing Address 4032 Hazelbrook Drive			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Springfield	L	62711	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Mckechen Ron	ation Nar	me	Transaction ID: 4B10317.E26336 Date of Disbursement
	Mailing Address 4032 Hazelbrook Drive			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	L	62711	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organiz Mckechen Ron	ation Nar	me	Transaction ID: 4B10317.E26337 Date of Disbursement
	Mailing Address 4032 Hazelbrook Drive			11 M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Springfield	L	62711	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Mckechen Ron	ation Nar	me	Transaction ID: 4B10317.E25701 Date of Disbursement
	Mailing Address 4032 Hazelbrook Drive			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Springfield	L	62711	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organiz	ation Nar	me	Transaction ID: 4B10317.E25702
E.	Mckechen Ron			Date of Disbursement
	Mailing Address 4032 Hazelbrook Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	L	62711	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
r	SUBTOTAL of Disbursements This Page (optional)			<b>▶</b> 0.00

S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 375 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c Lx 5
	ny Information copied from such Reports and Statements mar r for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Funk Elaine	ame	Transaction ID: 4B10317.E25703 Date of Disbursement
	Mailing Address 2005 Claremont		M M / D D / Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization No.	ame	Transaction ID: 4B10317.E25704 Date of Disbursement
	Mailing Address 2005 Claremont		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Na Funk Elaine	ame	Transaction ID: 4B10317.E26338 Date of Disbursement
	Mailing Address 2005 Claremont		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization No.	ame	Transaction ID: 4B10317.E26339 Date of Disbursement
	Mailing Address 2005 Claremont		M M / D D / Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Funk Elaine	ame	Transaction ID: 4B10317.E25333 Date of Disbursement
	Mailing Address 2005 Claremont		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	<u> </u>	Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 376 / 534
П	EMIZED DISBURSEMENTS		for each category of the	(check only one)
C	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Funk Elaine	n Nam	е	Transaction ID: 4B10317.E25334 Date of Disbursement
	Mailing Address 2005 Claremont			M M / D D D / Y Y Y Y Y
	City State Springfield IL	Э	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Funk Elaine	n Nam	e	Transaction ID: 4B10317.E25335 Date of Disbursement
	Mailing Address 2005 Claremont			10 d d d d d d d d d d d d d d d d d d d
	City State Springfield IL	9	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		02700	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Funk Elaine	n Nam	е	Transaction ID: 4B10317.E26029 Date of Disbursement
	Mailing Address 2005 Claremont			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	€	Zip Code 62703	Amount of Each Disbursement this Period
	Purpose of Disbursement		02703	Account:   FVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
 D.	Full Name (Last, First, Middle Initial) / Full Organization Funk Elaine	n Nam	е	Transaction ID: 4B10317.E26030 Date of Disbursement
	Mailing Address 2005 Claremont			1 1 M M / D D / Y Y Y Y Y
	City State	Э	Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62703	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	е	Transaction ID: 4B10317.E26031 Date of Disbursement
	Mailing Address 2005 Claremont			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	<del>)</del>	Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62703	20.00
	Purpose of Disbursement			Account: LEVIN
<b>—</b>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)			0.00

C	CHEDIUS I B /FFC Form 2V)		
	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 377 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a  4c  x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c Lx 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and		erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
<b>A</b> .	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	Name	Transaction ID: 4B10317.E26032 Date of Disbursement
	Mailing Address Rr 2 Box 31		11 1
	City State Carrollton IL	Zip Code 62016	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	Name	Transaction ID: 4B10317.E26033 Date of Disbursement
	Mailing Address Rr 2 Box 31		1 1 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL	62016	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	Name	Transaction ID: 4B10317.E26034 Date of Disbursement
	Mailing Address Rr 2 Box 31		111 D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL	62016	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	Name	Transaction ID: 4B10317.E25336 Date of Disbursement
	Mailing Address Rr 2 Box 31		10 M / D 3 D / Y 2 0 1 0 Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL	62016	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	Name	<b>Transaction ID:</b> 4B10317.E25337 Date of Disbursement
	Mailing Address Rr 2 Box 31		10 / 30 / Y Y Y Y
	City State Carrollton IL	Zip Code 62016	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
<u> [</u>	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 378 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	n Nan	ne	Transaction ID: 4B10317.E25338 Date of Disbursement
	Mailing Address Rr 2 Box 31			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL		62016	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	n Nan	ne	Transaction ID: 4B10317.E26340 Date of Disbursement
	Mailing Address Rr 2 Box 31			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL		62016	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	n Nan	ne	<b>Transaction ID:</b> 4B10317.E26341 Date of Disbursement
	Mailing Address Rr 2 Box 31			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL		62016	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Roth Ryan	Nan	ne	Transaction ID: 4B10317.E26342 Date of Disbursement
	Mailing Address Rr 2 Box 31			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL		62016	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	Nan	пе	Transaction ID: 4B10317.E25705 Date of Disbursement
	Roth Ryan  Mailing Address Rr 2 Box 31			10
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Carrollton IL		62016	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 379 / 534
I.	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Fage	4a 4c LX 5
	ny Information copied from such Reports and Statemer for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiz Roth Ryan	ation Na	ame	Transaction ID: 4B10317.E25706 Date of Disbursement
	Mailing Address Rr 2 Box 31			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State	Zip Code	Amount of Each Disbursement this Period
		IL	62016	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Roth Ryan	ation Na	ame	Transaction ID: 4B10317.E25707 Date of Disbursement
	Mailing Address Rr 2 Box 31			1 0 M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Carrollton	IL	62016	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Pennman Travis	ation Na	ame	Transaction ID: 4B10317.E25708 Date of Disbursement
	Mailing Address 512 Vanderbuilt			M M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
		IL	62684	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Pennman Travis	ation Na	ame	Transaction ID: 4B10317.E25709 Date of Disbursement
	Mailing Address 512 Vanderbuilt			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
		IL	62684	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Pennman Travis	ation Na	ame	Transaction ID: 4B10317.E25710 Date of Disbursement
	Mailing Address 512 Vanderbuilt			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		State	Zip Code 62684	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	-	02001	Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 380 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_		Aggregation Page	4a 4c x 5
_	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
K	NAME OF COMMITTEE (In Full)	aros or arry pomisar committee	
`	Illinois Republican Party		
Z	· · · · · · · · · · · · · · · · · · ·		Transaction ID: 4D10017 F0F711
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25711 Date of Disbursement
	Pennman Travis		M M / D D / Y Y Y Y
	Mailing Address 512 Vanderbuilt		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25712
В.	Pennman Travis	• • •	Date of Disbursement
	Mailing Address 512 Vanderbuilt		10 31 Y Y Y Y Y Y
	Walling Address 512 Validerbuilt		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organization Na	eme	Transaction ID: 4B10317.E26345
C.	Pennman Travis	aric	Date of Disbursement
			1 1 0 0 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 512 Vanderbuilt		11 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26343
D.	Pennman Travis	• • •	Date of Disbursement
	Mailing Address 512 Vanderbuilt		1 1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	The state of the s		
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26344
E.	Pennman Travis		Date of Disbursement
	Mailing Address 512 Vanderbuilt		11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 312 Validerbuilt		02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 381 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	
	OF LEVIN FUNDS	Aggregation Fage	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements m r for commercial purposes, other than using the name and a		erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Pennman Travis	lame	Transaction ID: 4B10317.E25814 Date of Disbursement
	Mailing Address 512 Vanderbuilt		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25339 Date of Disbursement
	Mailing Address 512 Vanderbuilt		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Pennman Travis	lame	Transaction ID: 4B10317.E25340 Date of Disbursement
	Mailing Address 512 Vanderbuilt		M M / D D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	Jame	Transaction ID: 4B10317.E25341 Date of Disbursement
	Mailing Address 512 Vanderbuilt		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u>-</u> Е.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25342 Date of Disbursement
	Mailing Address 512 Vanderbuilt		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
T	SUBTOTAL of Disbursements This Page (optional)		0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 382 / 534
ı	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
		Aggregation Page	4a 4c x 5
_	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
K	NAME OF COMMITTEE (In Full)	aroo or arry pointour committee	to control control control control
	Illinois Republican Party		
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26035 Date of Disbursement
Α.	Pennman Travis		
	Mailing Address 512 Vanderbuilt		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
		02004	
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Pennman Travis	ame	Transaction ID: 4B10317.E26036 Date of Disbursement
			1 1 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 512 Vanderbuilt		11 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Sherman IL	62684	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Goty Incent Gift Card		[MEMO ITEM]
_			-
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Sheikh Adbi	ame	Transaction ID: 4B10317.E25343 Date of Disbursement
	Mailing Address 2319 William Maxwell Lane		10 M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chata	7in Cada	Amount of Each Disbursement this Period
	City State Springfield IL	Zip Code 62703	
	<u>-1- 3</u>	62703	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25344
D.	Sheikh Adbi		Date of Disbursement
	Mailing Address 2319 William Maxwell Lane		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62703	
		02703	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
_	Memo. Generic Golv Incent Girt Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25345
E.	Sheikh Adbi		Date of Disbursement
	Mailing Address 2319 William Maxwell Lane		10
			Assessed of Freeh Distriction
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62703	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
۲	CURTOTAL of Dishare and Till Day of the B		
	SUBTOTAL of Disbursements This Page (optional)		0.00

	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 383 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Sheikh Adbi	ame	Transaction ID: 4B10317.E25346 Date of Disbursement
	Mailing Address 2319 William Maxwell Lane		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>—</b> В.	Full Name (Last, First, Middle Initial) / Full Organization Na Sheikh Adbi	ame	Transaction ID: 4B10317.E25347 Date of Disbursement
	Mailing Address 2319 William Maxwell Lane		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	32100	Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Sheikh Adbi	ame	Transaction ID: 4B10317.E25348 Date of Disbursement
	Mailing Address 2319 William Maxwell Lane		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62703	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Adkisson Sam	ame	Transaction ID: 4B10317.E25349 Date of Disbursement
	Mailing Address 325 Keystone		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chatham IL	62629	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organization Na Adkisson Sam	ame	Transaction ID: 4B10317.E26039 Date of Disbursement
	Mailing Address 325 Keystone		111 / 01 / Y Y Y Y
	City State Chatham IL	Zip Code 62629	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	<del>_</del>	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

,	COUEDIN E L. D. (EEO E OV)	_		
;	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 384 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
_(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	Any Information copied from such Reports and Statements rour for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Adkisson Sam	Name	9	Transaction ID: 4B10317.E26346 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 325 Keystone			
	City State		Zip Code	Amount of Each Disbursement this Period
	<u>Chatham</u> IL		62629	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Adkisson Sam	Name	е	Transaction ID: 4B10317.E26347 Date of Disbursement
	Mailing Address 325 Keystone			M M / D D / Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Chatham IL		62629	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	Э	Transaction ID: 4B10317.E25713
C.	Adkisson Sam			Date of Disbursement
	Mailing Address 325 Keystone			M M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Chatham IL		62629	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<del>-</del> D.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Э	Transaction ID: 4B10317.E25714 Date of Disbursement
	Stewart Clarence Mailing Address 125 S Wesley			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62702	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Stewart Clarence	Name	e	Transaction ID: 4B10317.E25715 Date of Disbursement
	Mailing Address 125 S Wesley			10 M / D D / Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62702	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
T	SUBTOTAL of Disbursements This Page (optional)			0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 385 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Stewart Clarence	ame	Transaction ID: 4B10317.E26040 Date of Disbursement
	Mailing Address 125 S Wesley		M M / D D / Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62702	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Stewart Clarence	ame	Transaction ID: 4B10317.E25350 Date of Disbursement
	Mailing Address 125 S Wesley		10
	City State Springfield IL	Zip Code 62702	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	02702	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Stewart Clarence	lame	Transaction ID: 4B10317.E25351 Date of Disbursement
	Mailing Address 125 S Wesley		M M / D D / Y Y Y Y Y
	City State Springfield IL	Zip Code 62702	Amount of Each Disbursement this Period
	Springfield IL  Purpose of Disbursement	02702	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Williams Mike	ame	Transaction ID: 4B10317.E25352 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62704	Amount of Each Disbursement this Period
	Springfield IL  Purpose of Disbursement	02704	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N Williams Mike	ame	Transaction ID: 4B10317.E26045 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62704	20.00
<b>-</b>	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
1	SUBTOTAL of Disbursements This Page (optional)		0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 386 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	Any Information copied from such Reports and Statements mayor for commercial purposes, other than using the name and add		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Williams Mike	me	Transaction ID: 4B10317.E26046 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Williams Mike	me	Transaction ID: 4B10317.E26047 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	02701	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Williams Mike	me	Transaction ID: 4B10317.E25716 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Mcgowen Tabatha	me	Transaction ID: 4B10317.E25717 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Mcgowen Tabatha	me	Transaction ID: 4B10317.E26048 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62704	20.00
-	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

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,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 387 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a   4c   15 4b   4d
	ny Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ad		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Mcgowen Tabatha	ame	Transaction ID: 4B10317.E26049 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		M M / D D / Y Y Y Y Y
	City State Springfield IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Mcgowen Tabatha	ame	Transaction ID: 4B10317.E26050 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		1 1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	<u>02704</u>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Mcgowen Tabatha	ame	Transaction ID: 4B10317.E25353 Date of Disbursement
	Mailing Address 800 S Durkin Drive Apt 454		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Sronce Greg	ame	<b>Transaction ID:</b> 4B10317.E25354 Date of Disbursement
	Mailing Address 205 S English		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sprinfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Sronce Greg	ame	<b>Transaction ID:</b> 4B10317.E25718 Date of Disbursement
	Mailing Address 205 S English		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Sprinfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
r	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 388 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements ma	uv not be sold or used by any pe	4b 4d
	r for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
K			Transaction ID: 4B10217 E26240
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26349 Date of Disbursement
	Sronce Greg		M M / D D / Y Y Y Y
	Mailing Address 205 S English		111 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Sprinfield, IL	62704	20.00
	Purpose of Disbursement	<u> </u>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_			Transaction ID: 4B10317.E26350
В.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Date of Disbursement
	Sronce Greg		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 205 S English		11 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Sprinfield, IL	62704	20.00
	Purpose of Disbursement	<u> </u>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_			Transaction ID: 4B10317.E26351
C.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Date of Disbursement
	Sronce Greg		M M / D D / Y Y Y Y
	Mailing Address 205 S English		1 1 0 2 2 0 1 0
	City State	Zip Code	Amount of Each Disbursement this Period
	Sprinfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ama	Transaction ID: 4B10317.E26352
D.	Meir Jb	ame	Date of Disbursement
	Mailing Address 405 Treeline Lane		1 1 0 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 403 Treeline Lane		11 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62703	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26353
E.	Meir Jb		Date of Disbursement
	Mailing Address 405 Treeline Lane		1 1 0 2 Y Y Y Y Y Y
	Maining Address 400 Freeine Lane		77 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62703	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00
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Ò	OUEDINE L. D. (EEO Esses OV)	_		,
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 389 / 534 (check only one)
П	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
C	OF LEVIN FUNDS	'	Aggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statements refor commercial purposes, other than using the name and a			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Meir Jb	Name	)	Transaction ID: 4B10317.E26354 Date of Disbursement
	Mailing Address 405 Treeline Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62703	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Meir Jb	Name	9	Transaction ID: 4B10317.E25719 Date of Disbursement
	Mailing Address 405 Treeline Lane			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62703	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Meir Jb	Name	)	<b>Transaction ID:</b> 4B10317.E25355 Date of Disbursement
	Mailing Address 405 Treeline Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62703	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	9	Transaction ID: 4B10317.E25356 Date of Disbursement
D.	Egiizi Rich			M M / D D / Y Y Y Y
	Mailing Address 2823 Dryden			30 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62711	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	Name	<u> </u>	Transaction ID: 4B10317.E25357 Date of Disbursement
⊏.	Egiizi Rich			M M / D D / Y Y Y Y
	Mailing Address 2823 Dryden			30 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62711	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN
_				[MEMO ITEM]
{	SUBTOTAL of Disbursements This Page (optional)			0.00

	2011-211-21-21-21-21-21-21-21-21-21-21-21-			
,	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 390 / 534
I	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5 4b 4d
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Egiizi Rich	Nam	е	Transaction ID: 4B10317.E25358 Date of Disbursement
	Mailing Address 2823 Dryden			M M / D D / Y Y Y Y Y Y
	City State Springfield IL		Zip Code 62711	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Egiizi Rich	Nam	е	Transaction ID: 4B10317.E25720 Date of Disbursement
	Mailing Address 2823 Dryden			10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL		Zip Code 62711	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<del>-</del> С.	Full Name (Last, First, Middle Initial) / Full Organization Egiizi Rich	Nam	e	Transaction ID: 4B10317.E25721 Date of Disbursement
	Mailing Address 2823 Dryden			10 M / D D / Y Y Y Y Y
	City State Springfield IL		Zip Code 62711	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Cook April	Nam	e	<b>Transaction ID:</b> 4B10317.E25722 Date of Disbursement
	Mailing Address 308 Estes Park Drive			10 <sup>M</sup> / 31 / Y 2010 <sup>Y</sup>
	City State Chatham IL		Zip Code 62629	Amount of Each Disbursement this Period 20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Cook April	Nam	е	Transaction ID: 4B10317.E25723 Date of Disbursement
	Mailing Address 308 Estes Park Drive			10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chatham IL		Zip Code 62629	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
r	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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,	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 391 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
_			Aggregation Page	4a 4c x 5
_	OF LEVIN FUNDS			4b 4d
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and			
K	NAME OF COMMITTEE (In Full)		oo or arry portuous committee	
	Illinois Republican Party			
Z	<u> </u>			Transaction ID: 4B10317.E25359
A.	Full Name (Last, First, Middle Initial) / Full Organization	Name	)	Date of Disbursement
	Cook April			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 308 Estes Park Drive			10 M / 30 / Y 2010 Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Chatham IL		62629	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	<u> </u>	Transaction ID: 4B10317.E25360
В.	Cook April		•	Date of Disbursement
	Mailing Address 308 Estes Park Drive			10 J J J J J J J J J J J J J J J J J J J
	Mailing Address Suo Estes Fair Dilve			10 30 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Chatham IL		62629	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organization	Name	`	Transaction ID: 4B10317.E26054
C.	Cook April	ivaiiie	<del>,</del>	Date of Disbursement
	<u>'</u>			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 308 Estes Park Drive			11 01 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Chatham IL		62629	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	9	Transaction ID: 4B10317.E26058
D.	Bradley Emily			Date of Disbursement
	Mailing Address 1837 N 9th Street			1 1 0 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	1007 14 011 011 011			
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62702	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	· · · · · · · · · · · · · · · · · · ·	Transaction ID: 4B10317.E26059
E.	Bradley Emily			Date of Disbursement
	Mailing Address 1837 N 9th Street			11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62702	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
r	SUBTOTAL of Disbursements This Page (optional)			
- 1	CODICINE OF DISSURGEMENTS THIS Fage (optional)			0.00

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	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 392 / 534
	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
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	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Bradley Emily	ame	Transaction ID: 4B10317.E26060 Date of Disbursement
	Mailing Address 1837 N 9th Street		M M / D D / Y Y Y Y Y Y
	City State Springfield, IL	Zip Code 62702	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	V=- 0 <u>=</u>	Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Bradley Emily	ame	Transaction ID: 4B10317.E25361 Date of Disbursement
	Mailing Address 1837 N 9th Street		10
	City State Springfield, IL	Zip Code 62702	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	OL I OL	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Bradley Emily	ame	Transaction ID: 4B10317.E25362 Date of Disbursement
	Mailing Address 1837 N 9th Street		10 D D / Y Y Y Y Y
	City State Springfield. IL	Zip Code 62702	Amount of Each Disbursement this Period
	Springfield, IL  Purpose of Disbursement	02702	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Bradley Emily	ame	Transaction ID: 4B10317.E25363 Date of Disbursement
	Mailing Address 1837 N 9th Street		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62702	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25724 Date of Disbursement
	Bradley Emily  Mailing Address 1837 N 9th Street		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62702	20.00
	Purpose of Disbursement		Account: LEVIN
⊢	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
1 9	SUBTOTAL of Disbursements This Page (optional)		0.00

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٤	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 393 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
•	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
_	Any Information copied from such Reports and Statements	may n	ot be sold or used by any per	son for the purpose of soliciting contributions
	or for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full)			
۱,	Illinois Republican Party			
Z				Transaction ID: 4B10317.E25725
A.	Full Name (Last, First, Middle Initial) / Full Organization	Name	9	Date of Disbursement
	Bradley Emily			10  31  Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1837 N 9th Street			10 31 2010
	City State	·	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62702	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name		Transaction ID: 4B10317.E26359
В.	Bradley Emily	inaiii	<del>-</del>	Date of Disbursement
	Mailing Address 1837 N 9th Street			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1657 IN 9111 Street			11 02 2010
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62702	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	9	Transaction ID: 4B10317.E26360
C.	Bradley Emily			Date of Disbursement
	Mailing Address 1837 N 9th Street			11 0 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	:	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62702	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	e	Transaction ID: 4B10317.E26361
D.	Richardson John			Date of Disbursement
	Mailing Address 3800 Oakwood Circle			111 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
				Amount of Each Disbursement this Period
	City State		Zip Code	
	Taylorville IL		62568	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN
_				[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	Name	9	Transaction ID: 4B10317.E26362 Date of Disbursement
	Richardson John			M M / D D / Y Y Y Y
	Mailing Address 3800 Oakwood Circle			11 02 2010
	Cit.		7in Onda	Amount of Each Disbursement this Period
	City State Taylorville IL	!	Zip Code 62568	20.00
	Purpose of Disbursement		02000	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
۲				
1	SUBTOTAL of Disbursements This Page (optional)			0.00

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 394 / 534
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)
C	F LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and State for commercial purposes, other than using the nar			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Richardson John	nization Na	ame	Transaction ID: 4B10317.E25364 Date of Disbursement
	Mailing Address 3800 Oakwood Circle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Taylorville	State IL	Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	- IL	02000	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ	nization Na	ame	Transaction ID: 4B10317.E25365 Date of Disbursement
	Richardson John  Mailing Address 3800 Oakwood Circle			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	Taylorville	IL	62568	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organ Richardson John	nization Na	ame	Transaction ID: 4B10317.E25366 Date of Disbursement
	Mailing Address 3800 Oakwood Circle			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Taylorville	IL	62568	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Richardson John	nization Na	ame	<b>Transaction ID:</b> 4B10317.E25726 Date of Disbursement
	Mailing Address 3800 Oakwood Circle			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Taylorville	IL	62568	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organ Richardson John	nization Na	ame	Transaction ID: 4B10317.E25727 Date of Disbursement
	Mailing Address 3800 Oakwood Circle			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	Taylorville	IL	62568	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
9	SUBTOTAL of Disbursements This Page (optional	)		0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 395 / 534 (check only one)
Α	ny Information copied from such Reports and Statement: for commercial purposes, other than using the name an			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization	n Nar	ne	Transaction ID: 4B10317.E26061 Date of Disbursement
	Mailing Address 3800 Oakwood Circle			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat Taylorville IL	te	Zip Code 62568	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Richardson John Mailing Address 3800 Oakwood Circle	on Nar	ne	Transaction ID: 4B10317.E26062 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat Taylorville IL Purpose of Disbursement	te	Zip Code 62568	Amount of Each Disbursement this Period 20.00  Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Richardson John Mailing Address 3800 Oakwood Circle	on Nar	ne	Transaction ID: 4B10317.E26063 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat Taylorville IL	te	Zip Code 62568	Amount of Each Disbursement this Period
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		02300	Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	n Nar	ne	Transaction ID: 4B10317.E26064 Date of Disbursement
	Mailing Address 500 West Monroe			1 1 D D / Y Y Y Y Y Y
	City Stat Springfield, IL	te	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	n Nar	ne	Transaction ID: 4B10317.E26065 Date of Disbursement
	Mailing Address 500 West Monroe			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Stat Springfield, IL	te	Zip Code 62704	Amount of Each Disbursement this Period 20.00
<b>—</b>	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 396 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
Α	ny Information copied from such Reports and Statements ma		
OI	for commercial purposes, other than using the name and ad	dress of any political committee	to solicit contributions from such committee
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Z	illillois nepublican Faity		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E26066 Date of Disbursement
	Mailing Address 500 West Monroe		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26067 Date of Disbursement
	Griswold Andrew		M M / D D / Y Y Y Y
	Mailing Address 500 West Monroe		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26068
C.	Griswold Andrew		Date of Disbursement
	Mailing Address 500 West Monroe		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26069 Date of Disbursement
D.	Griswold Andrew		M M / D D / Y Y Y Y
	Mailing Address 500 West Monroe		111 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26070
E.	Griswold Andrew		Date of Disbursement
	Mailing Address 500 West Monroe		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b> 0.00
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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 397 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
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	ny Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E25728 Date of Disbursement
	Mailing Address 500 West Monroe		M M / D D / Y Y Y Y Y Y
	City State Springfield, IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E25729 Date of Disbursement
	Mailing Address 500 West Monroe		10
	City State Springfield, IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	<b>Transaction ID:</b> 4B10317.E25730 Date of Disbursement
	Mailing Address 500 West Monroe		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	<b>Transaction ID:</b> 4B10317.E25731 Date of Disbursement
	Mailing Address 500 West Monroe		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	<b>Transaction ID:</b> 4B10317.E25732 Date of Disbursement
	Mailing Address 500 West Monroe		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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S	CHEDULE L-B (FEC Form 3X)		FOR LINE NUMBER: PAGE 398 / 534
	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
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	y Information copied from such Reports and Statements m	ay not be sold or used by any pe	4b 4d
or	for commercial purposes, other than using the name and a	ddress of any political committee	to solicit contributions from such committee
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Griswold Andrew	ame	Transaction ID: 4B10317.E25733 Date of Disbursement
	Mailing Address 500 West Monroe		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25734 Date of Disbursement
	Mailing Address 500 West Monroe		10  31
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25735
C.	· · · · · · · · · · · · · · · · · · ·		Date of Disbursement
C.	Griswold Andrew  Mailing Address 500 West Monroe		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Griswold Andrew	Zip Code	M M / D D / Y Y Y
C.	Griswold Andrew  Mailing Address 500 West Monroe		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Griswold Andrew Mailing Address 500 West Monroe  City State	Zip Code	Amount of Each Disbursement this Period  20.00  Account: LEVIN
_	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization N	Zip Code 62704	Amount of Each Disbursement this Period
D.	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew	Zip Code 62704	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement
_	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization N	Zip Code 62704	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State	Zip Code 62704	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement
_	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State	Zip Code 62704	Amount of Each Disbursement this Period  20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 D.	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Norisword State Springfield, IL  Full Name (Last, First, Middle Initial) / Full Organization Norisword State Springfield, IL	Zip Code 62704 lame Zip Code 62704	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	Zip Code 62704 lame Zip Code 62704	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 D.	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew	Zip Code 62704	Amount of Each Disbursement this Period  20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M J D D / Y Y Y Y Y  Amount of Each Disbursement this Period  20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25368 Date of Disbursement
 D.	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe	Zip Code 62704 lame Zip Code 62704	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 D.	Griswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe  City State Springfield, IL  Full Name (Last, First, Middle Initial) / Full Organization Noriswold Andrew  Mailing Address 500 West Monroe	Zip Code 62704	Amount of Each Disbursement this Period  20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25367 Date of Disbursement  M M / 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 399 / 534	
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5	
C	F LEVIN FUNDS		Aggregation Page	4a   4c   LXJ 5   4d   4d	
	y Information copied from such Reports and Statements for commercial purposes, other than using the name an				
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
A.	Full Name (Last, First, Middle Initial) / Full Organization Griswold Andrew	n Na	me	Transaction ID: 4B10317.E25369 Date of Disbursement	
	Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Stat	e	Zip Code	Amount of Each Disbursement this Period	b
	Springfield, IL		62704	20.00	
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
В.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me	<b>Transaction ID:</b> 4B10317.E25370 Date of Disbursement	
	Mailing Address 500 West Monroe			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Stat	e	Zip Code	Amount of Each Disbursement this Period	t
	Springfield, IL		62704	20.00	
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me	Transaction ID: 4B10317.E25371 Date of Disbursement	
	Mailing Address 500 West Monroe			10 M / D D / Y Y Y Y Y Y	
	City Stat	e	Zip Code	Amount of Each Disbursement this Period	t
	Springfield, IL		62704	20.00	
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me	Transaction ID: 4B10317.E25372 Date of Disbursement	
	Mailing Address 500 West Monroe			10 M / D D / Y Y Y Y Y	
	City Stat	e	Zip Code	Amount of Each Disbursement this Period	t
	Springfield, IL		62704	20.00	
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
E.	Full Name (Last, First, Middle Initial) / Full Organization	n Na	me	Transaction ID: 4B10317.E25373 Date of Disbursement	
	Griswold Andrew  Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Stat	e	Zip Code	Amount of Each Disbursement this Period	t
	Springfield, IL		62704	20.00	
-	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	_		Account: LEVIN [MEMO ITEM]	
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 400 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS	'	Aggregation Fage	4a 4c Lx 5
	any Information copied from such Reports and Statements report for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Griswold Andrew	Name	)	Transaction ID: 4B10317.E25374 Date of Disbursement
	Mailing Address 500 West Monroe			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Griswold Andrew	Name	)	<b>Transaction ID:</b> 4B10317.E26363 Date of Disbursement
	Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Griswold Andrew	Name	)	Transaction ID: 4B10317.E26364 Date of Disbursement
	Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Griswold Andrew	Name	9	Transaction ID: 4B10317.E26365 Date of Disbursement
	Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<del>-</del> Е.	Full Name (Last, First, Middle Initial) / Full Organization Griswold Andrew	Name	9	Transaction ID: 4B10317.E26366 Date of Disbursement
	Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement		-	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 401 / 534
	EMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
_	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E26367 Date of Disbursement
	Mailing Address 500 West Monroe		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield, IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E26368 Date of Disbursement
	Mailing Address 500 West Monroe		111 02 7 2010
	City State Springfield, IL	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	<b>32</b> , 3.	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E26369 Date of Disbursement
	Mailing Address 500 West Monroe		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL  Purpose of Disbursement	62704	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E26370 Date of Disbursement
	Mailing Address 500 West Monroe		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E26371 Date of Disbursement
	Mailing Address 500 West Monroe		111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 402 / 534
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)
_	F LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Stateme for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nam	e	Transaction ID: 4B10317.E26372 Date of Disbursement
	Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Springfield,	L	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nam	е	Transaction ID: 4B10317.E26373 Date of Disbursement
	Mailing Address 500 West Monroe			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State L	Zip Code 62704	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		<u> </u>	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nam	e	Transaction ID: 4B10317.E26374 Date of Disbursement
	Mailing Address 500 West Monroe			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Springfield,	L	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nam	е	Transaction ID: 4B10317.E26375 Date of Disbursement
	Mailing Address 500 West Monroe			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Springfield,	L	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nam	e	Transaction ID: 4B10317.E26376 Date of Disbursement
	Mailing Address 500 West Monroe			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	L	62704	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
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1	<b>TOTAL</b> This Period (last page this line number only).			<b>&gt;</b>

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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 403 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	
(	OF LEVIN FUNDS	Aggregation Fage	4a 4c Lx 5
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Griswold Andrew	ame	Transaction ID: 4B10317.E26377 Date of Disbursement
	Mailing Address 500 West Monroe		11 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25375
В.	Tozer Ryan		Date of Disbursement
	Mailing Address 548 Canedy		10 M / 30 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
_			Transaction ID: 4B10317.E25376
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Tozer Ryan	ame	Date of Disbursement
	Mailing Address 548 Canedy		10 M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25377 Date of Disbursement
υ.	Tozer Ryan		
	Mailing Address 548 Canedy		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25736 Date of Disbursement
	Tozer Ryan		M M / D D / Y Y Y
	Mailing Address 548 Canedy		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 404 / 534 (check only one)
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(	OF LEVIN FUNDS		Aggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Tozer Ryan	Nam	е	Transaction ID: 4B10317.E25737 Date of Disbursement
	Mailing Address 548 Canedy			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Tozer Ryan	Nam	е	Transaction ID: 4B10317.E25738 Date of Disbursement
	Mailing Address 548 Canedy			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Tozer Ryan	Nam	е	Transaction ID: 4B10317.E26071 Date of Disbursement
	Mailing Address 548 Canedy			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State		Zip Code	Amount of Each Disbursement this Period
	Springfield, IL		62704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Oger Bill	Nam	е	Transaction ID: 4B10317.E26075 Date of Disbursement
	Mailing Address 2415 Linda Ave.			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Vandalia IL		62471	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Oger Bill	Nam	е	Transaction ID: 4B10317.E26092 Date of Disbursement
	Mailing Address 2415 Linda Ave.			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Vandalia IL		62471	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
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5	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 405 / 534
	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
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	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Oger Bill	ame	Transaction ID: 4B10317.E26093 Date of Disbursement
	Mailing Address 2415 Linda Ave.		1 1 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL  Purpose of Disbursement	62471	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Oger Bill	ame	Transaction ID: 4B10317.E25741 Date of Disbursement
	Mailing Address 2415 Linda Ave.		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Oger Bill	ame	Transaction ID: 4B10317.E25742 Date of Disbursement
	Mailing Address 2415 Linda Ave.		10 M / D D V Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL  Purpose of Disbursement	62471	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Oger Bill	ame	<b>Transaction ID:</b> 4B10317.E25743 Date of Disbursement
	Mailing Address 2415 Linda Ave.		10 M / D D Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL Purpose of Disbursement	62471	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organization N Oger Bill	ame	Transaction ID: 4B10317.E25378 Date of Disbursement
	Mailing Address 2415 Linda Ave.		10
	City State Vandalia IL	Zip Code 62471	Amount of Each Disbursement this Period
	Purpose of Disbursement	02471	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)		0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 406 / 534
ı	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_		Aggregation Page	4a 4c x 5
_	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
K	NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·	
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25413 Date of Disbursement
Α.	Oger Bill		
	Mailing Address 2415 Linda Ave.		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
	Purpose of Disbursement	32.7.1	
	Memo: Generic Goty Incent Gift Card		Account: LEVIN
_	Widne. denote detv moont ant our		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Oger Bill	ame	Transaction ID: 4B10317.E25392 Date of Disbursement
	Mailing Address 2415 Linda Ave.		10 30 Y Y Y Y Y Y
	Mailing Address 2415 Littua Ave.		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
		02471	
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
_	Memo. Generic Golv Incent Gilt Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	<b>Transaction ID:</b> 4B10317.E26378
C.	Oger Bill		Date of Disbursement
	Mailing Address 2415 Linda Ave.		11 02 7 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
	Purpose of Disbursement	02171	
	Memo: Generic Goty Incent Gift Card		Account: LEVIN
_	Widne. denote detv moont ant our		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26379 Date of Disbursement
D.	Oger Bill		
	Mailing Address 2415 Linda Ave.		1 1 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
	Purpose of Disbursement	<u> </u>	
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN
_	Widne. denote detv moont ant our		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26380
E.	Oger Bill		Date of Disbursement
	Mailing Address 2415 Linda Ave.		11  0  2  7  2  0  1  0
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
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	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
-	Memo. Generic Golv Incent Gill Card		[MEMO ITEM]
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 407 / 534	_
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)	
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5	
7	Any Information copied from such Reports and Statement or for commercial purposes, other than using the name are			rson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
Α.	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25379 Date of Disbursement	
	Mailing Address 68 Annebriar Dr.			10 M / D D / Y Y Y Y Y	
	City Sta	te	Zip Code	Amount of Each Disbursement this Period	
	Maryville IL		62062	20.00	
	Purpose of Disbursement			Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
В.	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25380 Date of Disbursement	_
	Mcnamara Cameron			10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Mailing Address 68 Annebriar Dr.			30 2010	
	City Sta	te	Zip Code	Amount of Each Disbursement this Period	
	Maryville IL		62062	20.00	
	Purpose of Disbursement			Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
С.	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25381 Date of Disbursement	_
	Mailing Address 221 Bernice			M M / D D / Y Y Y Y Y Y	
	City Sta	te	Zip Code	Amount of Each Disbursement this Period	
	Collinsville IL		62234	20.00	
	Purpose of Disbursement			Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E25382 Date of Disbursement	_
	Mailing Address 1326 Eileen			10 M / D D / Y Y Y Y Y Y	
	City Sta	te	Zip Code	Amount of Each Disbursement this Period	
	Collinsville		62234	20.00	
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E26384	_
E.	Buettner Ruth			Date of Disbursement	
	Mailing Address 1326 Eileen			111 / 02 / 2010	
	City Sta	te	Zip Code	Amount of Each Disbursement this Period	
	Collinsville IL		62234	20.00	
	Purpose of Disbursement			Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
r	SUBTOTAL of Disbursements This Page (optional)			<b>&gt;</b> 0.00	_

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 408 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c Lx 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Kukielski Stephen	n Nam	ne	Transaction ID: 4B10317.E25383 Date of Disbursement
	Mailing Address 934 Ivy Ct.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Troy IL	)	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	ne	Transaction ID: 4B10317.E25394 Date of Disbursement
В.	Kukielski Stephen			
	Mailing Address 934 Ivy Ct.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Troy IL		62294	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN [MEMO ITEM]
_				Transaction ID: 4B10317.E25391
C.	Full Name (Last, First, Middle Initial) / Full Organization Cahalan Nancy	n Nam	ne	Date of Disbursement
	Mailing Address 205 S. Locust St.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Highland IL		62249	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN
_				[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Cahalan Nancy	n Nam	ne	Transaction ID: 4B10317.E25384 Date of Disbursement
	Mailing Address 205 S. Locust St.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Highland IL		62249	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Rohan Dora	n Nam	пе	Transaction ID: 4B10317.E25385 Date of Disbursement
	Mailing Address 206 Crestwood Dr.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Collinsville IL		62234	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 409 / 534 (check only one)
П	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
C	OF LEVIN FUNDS		Aggregation rage	4b 4d 5
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
<b>∠</b> .	Full Name (Last, First, Middle Initial) / Full Organi Rohan Dora	zation Na	me	Transaction ID: 4B10317.E25396 Date of Disbursement
	Mailing Address 206 Crestwood Dr.			M M / D D / Y Y Y Y Y Y
	City Collinsville	State IL	Zip Code 62234	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Rohan Dora	zation Na	me	Transaction ID: 4B10317.E25407 Date of Disbursement
	Mailing Address 206 Crestwood Dr.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Collinsville	State IL	Zip Code 62234	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organi	zation Na	me	Transaction ID: 4B10317.E26383 Date of Disbursement
	Rohan Dora  Mailing Address 206 Crestwood Dr.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Collinsville	IL	62234	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi Rohan Dora	zation Na	me	Transaction ID: 4B10317.E25757 Date of Disbursement
	Mailing Address 206 Crestwood Dr.			10 M / D D / Y Y Y Y Y
	City Collinsville	State	Zip Code 62234	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		02204	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organi Rohan Dora	zation Na	me	Transaction ID: 4B10317.E25739 Date of Disbursement
	Mailing Address 206 Crestwood Dr.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Collinsville	State IL	Zip Code 62234	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		V==0 1	Account: LEVIN [MEMO ITEM]
Г				
13	<b>SUBTOTAL</b> of Disbursements This Page (optional)			0.00

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	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 410 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
C	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and		person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Rohan Dora	Name	Transaction ID: 4B10317.E25740 Date of Disbursement
	Mailing Address 206 Crestwood Dr.		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Collinsville IL	62234	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Kukielski Gwen	Name	Transaction ID: 4B10317.E26080 Date of Disbursement
	Mailing Address 934 Ivy Ct.		1 1
	City State	Zip Code	Amount of Each Disbursement this Period
	Troy IL	62294	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Kukielski Gwen	Name	<b>Transaction ID:</b> 4B10317.E26081 Date of Disbursement
	Mailing Address 934 Ivy Ct.		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Troy IL	62294	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Kukielski Gwen	Name	Transaction ID: 4B10317.E26382 Date of Disbursement
	Mailing Address 934 lvy Ct.		1 1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Troy IL	62294	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25395 Date of Disbursement
	Kukielski Gwen  Mailing Address 934 Ivy Ct.		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Troy IL	62294	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
$\vdash$			
15	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 411 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Fage	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements m r for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Kukielski Gwen	lame	Transaction ID: 4B10317.E25386 Date of Disbursement
	Mailing Address 934 Ivy Ct.		M M / D D / Y Y Y Y Y
	City State Troy IL	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	<u></u>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Ebbens Carolyn	lame	Transaction ID: 4B10317.E25387 Date of Disbursement
	Mailing Address 5235 Luzzane Ln.		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Indianapolis IN	46220	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Ebbens Carolyn	lame	Transaction ID: 4B10317.E25403 Date of Disbursement
	Mailing Address 5235 Luzzane Ln.		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Indianapolis IN	46220	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Ebbens Carolyn	lame	Transaction ID: 4B10317.E25393 Date of Disbursement
	Mailing Address 5235 Luzzane Ln.		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Indianapolis IN	46220	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	lamo	Transaction ID: 4B10317.E25414
E.	Ebbens Carolyn	acine	Date of Disbursement
	Mailing Address 5235 Luzzane Ln.		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Indianapolis IN	Zip Code 46220	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	:	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

IT C	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 412 / 534 (check only one)  4a 4c x 5 4d 4d
	ny Information copied from such Reports and Statem- for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  Illinois Republican Party			
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) / Full Organiz Ebbens Carolyn Mailing Address 5235 Luzzane Ln.	ation Nar	ne	Transaction ID: 4B10317.E26387 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State N	Zip Code 46220	Amount of Each Disbursement this Period 20.00
	Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organiz	ation Nar	no	Account: LEVIN [MEMO ITEM] Transaction ID: 4B10317.E25754
B.	Walters Corey  Mailing Address 705 Cheshire Rd.	allon iva		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State L	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Walters Corey Mailing Address 705 Cheshire Rd.	ation Nar	ne	Transaction ID: 4B10317.E25755 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		State L	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Walters Corey	ation Nar	ne	Transaction ID: 4B10317.E25756 Date of Disbursement
	Mailing Address 705 Cheshire Rd.			M M / D D / Y Y Y Y Y Y Y
	Troy	State L	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Walters Corey	ation Nar	ne	Transaction ID: 4B10317.E26390 Date of Disbursement
	Mailing Address 705 Cheshire Rd.			11 02 2010
		State L	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)			▶ 0.00

S	CHEDULE L-B (FEC Form 3X)		FOR LINE NUMBER: PAGE 413 / 534
	FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)
_	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statements may for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Walters Corey	ame	Transaction ID: 4B10317.E25415 Date of Disbursement
	Mailing Address 705 Cheshire Rd.		10 M / 30 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Troy IL	62294	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Walters Corey	ame	Transaction ID: 4B10317.E25397 Date of Disbursement
	Mailing Address 705 Cheshire Rd.		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Troy IL	62294	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25388 Date of Disbursement
	Walters Corey  Mailing Address 705 Cheshire Rd.		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Troy IL	62294	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Walters Corey	ame	Transaction ID: 4B10317.E25405 Date of Disbursement
	Mailing Address 705 Cheshire Rd.		10 M / 30 / Y Y Y Y Y
	City State Troy IL	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]	
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E26094
E.	Walters Corey		Date of Disbursement
	Mailing Address 705 Cheshire Rd.		111 01 2010
	City State Troy IL	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	VLLUT	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

	SCHEDULE L-B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 414 / 534 (check only one)
_	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	Any Information copied from such Reports and Statements may or for commercial purposes, other than using the name and add		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Walters Corey	me	Transaction ID: 4B10317.E26095 Date of Disbursement
	Mailing Address 705 Cheshire Rd.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Troy IL  Purpose of Disbursement	Zip Code 62294	Amount of Each Disbursement this Period 20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Hughes Jerome	me	Transaction ID: 4B10317.E25389 Date of Disbursement
	Mailing Address 1254 State St.		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Alton IL  Purpose of Disbursement	62002	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Hughes Jerome	me	Transaction ID: 4B10317.E25402 Date of Disbursement
	Mailing Address 1254 State St.		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Alton IL Purpose of Disbursement	62002	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Simpson Thomas	me	Transaction ID: 4B10317.E25390 Date of Disbursement
	Mailing Address 7185 Eagles Mount Ln		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Edwardsville IL  Purpose of Disbursement	62025	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Smith Jack	me	Transaction ID: 4B10317.E25398 Date of Disbursement
	Mailing Address 9713 Old Lincoln Tr.		10
	City State Fairview Hts IL	Zip Code 62208	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

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٤	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 415 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statemer r for commercial purposes, other than using the name a			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization	tion Na	nme	Transaction ID: 4B10317.E25399 Date of Disbursement
	Mailing Address 9713 Old Lincoln Tr.			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	ate	Zip Code	Amount of Each Disbursement this Period
	Fairview Hts IL	-	62208	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization	tion Na	ame	Transaction ID: 4B10317.E25400 Date of Disbursement
	Mailing Address 71 Christmas Tree Pt.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City St	ate	Zip Code	Amount of Each Disbursement this Period
	Edwardsville IL	_	62025	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organizati Karl Noella	tion Na	nme	Transaction ID: 4B10317.E25401 Date of Disbursement
	Mailing Address 524 Lone Robin			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City St	ate	Zip Code	Amount of Each Disbursement this Period
	Troy IL	-	62294	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat	tion Na	ame	Transaction ID: 4B10317.E25404 Date of Disbursement
	Mailing Address 211 Bernice			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City St	ate	Zip Code	Amount of Each Disbursement this Period
	Collinsville	-	62234	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organizati Futrell Velta	tion Na	ame	Transaction ID: 4B10317.E25416 Date of Disbursement
	Mailing Address 211 Bernice			10
	City St	ate	Zip Code	Amount of Each Disbursement this Period
	Collinsville	-	62234	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 416 / 534 (check only one)
П	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
C	OF LEVIN FUNDS		Aggregation age	4b 4d 4d
	ny Information copied from such Reports and Statement for commercial purposes, other than using the name ar			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization	on Nam	ne	Transaction ID: 4B10317.E26386 Date of Disbursement
	Mailing Address 211 Bernice			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Collinsville IL		62234	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization	on Nam	ne	Transaction ID: 4B10317.E26087 Date of Disbursement
	Mailing Address 211 Bernice			1 1
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Collinsville IL		62234	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization	on Nam	ne	Transaction ID: 4B10317.E26088 Date of Disbursement
	Mailing Address 211 Bernice			11 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Collinsville IL		62234	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	on Nam	ne	Transaction ID: 4B10317.E25406 Date of Disbursement
	Mailing Address 2415 Linda Ave			10 M / D D / Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL		62471	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	on Nam	ne	Transaction ID: 4B10317.E25408
E.	Voight Jason	-		Date of Disbursement
	Mailing Address 337 Glen Carbon Rd			10 J D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Glen Carbon IL		62034	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_				[MEMOTIEN]
{	SUBTOTAL of Disbursements This Page (optional)			0.00

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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 417 / 534
IП	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
C	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements	may ı	not be sold or used by any per	son for the purpose of soliciting contributions
	for commercial purposes, other than using the name and			
Λ	NAME OF COMMITTEE (In Full)			
-1/2	Illinois Republican Party			
<u>K</u>	Full Name (Last First Middle Initial) / Full Organization	. Nom		Transaction ID: 4B10317.E26388
A.	Full Name (Last, First, Middle Initial) / Full Organization Voight Jason	ınam	le	Date of Disbursement
	Mailing Address 337 Glen Carbon Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 337 Gleff Carboff Nd			11 02 2010
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Glen Carbon IL		62034	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	e	Transaction ID: 4B10317.E26389
В.	Wirth Carlene			Date of Disbursement
	Mailing Address 173 Sandridge Dr.			1 1 0 2 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	maining / daises 170 Garianage Dr.			77 02 2010
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Collinsville IL		62234	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	e	Transaction ID: 4B10317.E25409
C.	Wirth Carlene			Date of Disbursement
	Mailing Address 173 Sandridge Dr.			10  30  Y Y Y Y Y
	City State	9	Zip Code	Amount of Each Disbursement this Period
	Collinsville IL		62234	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	e	Transaction ID: 4B10317.E26090 Date of Disbursement
D.	Wirth Carlene			M M / D D / Y Y Y Y
	Mailing Address 173 Sandridge Dr.			1 1 0 1 2 0 1 0
	O't	_	7'- O-d-	Amount of Each Disbursement this Period
	City State Collinsville IL	9	Zip Code 62234	
	Purpose of Disbursement		02234	20.00
	Memo: Generic Goty Incent Gift Card			Account: LEVIN [MEMO ITEM]
_				-
E.	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	e	Transaction ID: 4B10317.E25410 Date of Disbursement
	Peterson George			M M / D D / Y Y Y Y
	Mailing Address 728 Deerfield Dr			10 30 2010
	City State		7in Code	Amount of Each Disbursement this Period
	Swansea IL	,	Zip Code 62226	20.00
	Purpose of Disbursement		<u> </u>	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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1 5	SUBTOTAL of Disbursements This Page (optional)			0.00

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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicting committees for or commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.  A. Full Name (Last, First, Middle Initial) / Full Organization Name  A. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glen Carbon IL 62034  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glen Carbon IL 62034  Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glen Carbon IL 62034  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Glen Carbon ID 4810317.E2575B  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25412  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25412  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25412  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25412  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25412  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25412  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25412  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25417  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25417  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25417  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25761  Defend of Disbursement Initis Period Clen Carbon ID 4810317.E25761  Defend of Disbursement Initis Period Clen Clen Clen Clen Clen Clen Clen Clen		•	Use separate schedule(s)	1 011
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Illinois Republican Party				
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B. Thomas Andy  Mailing Address 32 Grainey Dr  City State Zip Code Glen Carbon IL 62034  Purpose of Disbursement Memo: Generic Gotor Incent Gift Card  C. Full Name (Last, First, Middle Initial) / Full Organization Name  Dehne Ruth  Mailing Address 8 Cherrywood Ct  City State Zip Code IM Name (Last, First, Middle Initial) / Full Organization Name  Dehne Ruth  Mailing Address 8 Cherrywood Ct  City State Zip Code Belleville IL 62221  Purpose of Disbursement Memo: Generic Gotor Incent Gift Card  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Grip State Zip Code IL 62305  Purpose of Disbursement  Mailing Address 5107 Lookout Ridge  City State Zip Code Amount of Each Disbursement this Period 20.00  Account: LEVIN IMMEMO ITEM IMMEMO I	_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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C. Dehne Ruth  Mailing Address 8 Cherrywood Ct  City State Zip Code Belleville IL 62221  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Benner Pat Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E25417 Date of Disbursement  M M M D D D D D D D D D D D D D D D D		Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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Purpose of Disbursement Memo: Generic Gotv Incent Gift Card    Memo: Generic Gotv Incent Gift Card   Memo: G		City State	Zip Code	Amount of Each Disbursement this Period
Memo: Generic Gotv Incent Gift Card  [MEMO ITEM]  D. Full Name (Last, First, Middle Initial) / Full Organization Name Benner Pat  Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Benner Pat Mailing Address 5107 Lookout Ridge  Full Name (Last, First, Middle Initial) / Full Organization Name Benner Pat Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Amount of Each Disbursement this Period Date of Disbursement  M M M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Belleville IL	62221	20.00
Date of Disbursement  Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Benner Pat Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Transaction ID: 4B10317.E25761 Date of Disbursement Date of Disbursement Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN  Mailing Address 5107 Lookout Ridge  Amount of Each Disbursement this Period  Account: LEVIN  Memo: Generic Gotv Incent Gift Card  Account: LEVIN  Memo: Generic Gotv Incent Gift Card		•		
Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Benner Pat Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN Transaction ID: 4B10317.E25761  Date of Disbursement Memo: Generic Gotv Incent Gift Card  Amount of Each Disbursement Transaction ID: 4B10317.E25761  Date of Disbursement This Period Quincy IL 62305  Account: LEVIN [MEMO ITEM]	D.	,	lame	Date of Disbursement
Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  Benner Pat  Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25761  Date of Disbursement  M M M J D D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				10 M / D D / Y Y Y Y Y
Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Benner Pat Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25761 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		City State	Zip Code	Amount of Each Disbursement this Period
Memo: Generic Gotv Incent Gift Card  [MEMO ITEM]  Full Name (Last, First, Middle Initial) / Full Organization Name  Benner Pat  Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  [MEMO ITEM]  Transaction ID: 4B10317.E25761  Date of Disbursement  Amount of Each Disbursement this Period  Account: LEVIN [MEMO ITEM]		Quincy IL	62305	20.00
E. Benner Pat  Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Date of Disbursement  M M M / D D D / Y Y Y Y Y Y 2 0 1 0  Amount of Each Disbursement this Period  Account: LEVIN [MEMO ITEM]		·		
Mailing Address 5107 Lookout Ridge  City State Zip Code Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]	<b>Е</b> .		lame	
Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]				10 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Quincy IL 62305  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]		City State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]		•	-	20.00
Memo: Generic Gotv Incent Gift Card [MEMO ITEM]				
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	Γ	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 419 / 534
	EMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
_	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Benner Pat	ame	Transaction ID: 4B10317.E26391 Date of Disbursement
	Mailing Address 5107 Lookout Ridge		11 0 2 7 2 0 1 0
	City State Quincy IL	Zip Code 62305	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	02000	Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization No Benner Pat	ame	Transaction ID: 4B10317.E26098 Date of Disbursement
	Mailing Address 5107 Lookout Ridge		111 01 7 2010
	City State Quincy IL	Zip Code 62305	Amount of Each Disbursement this Period
		02303	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Na Meier Jane	ame	Transaction ID: 4B10317.E26099 Date of Disbursement
	Mailing Address 310 E York St		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Camp Point IL	62320	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Meier Jane	ame	Transaction ID: 4B10317.E25418 Date of Disbursement
	Mailing Address 310 E York St		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Camp Point IL	62320	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25419 Date of Disbursement
	Crank Shirley  Mailing Address 228 Lexington		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)		0.00

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	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 420 / 534 (check only one)
П	EMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a 4c x 5
C	OF LEVIN FUNDS	Aggregation age	4b 4d 5
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Crank Shirley	ame	Transaction ID: 4B10317.E25762 Date of Disbursement
	Mailing Address 228 Lexington		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Crank Shirley	ame	Transaction ID: 4B10317.E26100 Date of Disbursement
	Mailing Address 228 Lexington		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Ensley Rick	ame	<b>Transaction ID:</b> 4B10317.E25420 Date of Disbursement
	Mailing Address 907 S 5th St		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25421 Date of Disbursement
υ.	Dulaney Dave		M M / D D / Y Y Y
	Mailing Address 3800 Stonegate Rd		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25422
E.	Dearing Matthew		Date of Disbursement  M M / D D / Y Y Y Y
	Mailing Address 2602 Lind St		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
$\vdash$			[INICINIO ITEM]
15	SUBTOTAL of Disbursements This Page (optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 421 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the	
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements r r for commercial purposes, other than using the name and		erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Z			- ID 10017 F05 100
A.	Full Name (Last, First, Middle Initial) / Full Organization Dearing Matthew	Name	Transaction ID: 4B10317.E25423 Date of Disbursement
	Mailing Address 2602 Lind St		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Dearing Matthew	Name	Transaction ID: 4B10317.E25424 Date of Disbursement
	Mailing Address 2602 Lind St		10 D D Y Y Y Y Y Y
	City. Ctate	7in Code	Amount of Each Disbursement this Period
	City State Quincy IL	Zip Code 62301	20.00
	Purpose of Disbursement	02001	
	Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
_			Transaction ID: 4B10317.E25763
C.	Full Name (Last, First, Middle Initial) / Full Organization Dearing Matthew	Name	Date of Disbursement
	Mailing Address 2602 Lind St		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25764
D.	Dearing Matthew		Date of Disbursement
	Mailing Address 2602 Lind St		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E26392
E.	Dearing Matthew		Date of Disbursement
	Mailing Address 2602 Lind St		111 02 7 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 422 / 534
П	EMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
_	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Dearing Matthew	ame	Transaction ID: 4B10317.E26393 Date of Disbursement
	Mailing Address 2602 Lind St	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Dearing Matthew	ame	Transaction ID: 4B10317.E26394 Date of Disbursement
	Mailing Address 2602 Lind St		11 02 7 2010
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Dearing Matthew	ame	Transaction ID: 4B10317.E26101 Date of Disbursement
	Mailing Address 2602 Lind St		1 1 M / D D / Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Dearing Matthew	ame	Transaction ID: 4B10317.E26102 Date of Disbursement
	Mailing Address 2602 Lind St		M M / D D / Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	02001	Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26103 Date of Disbursement
	Dearing Matthew  Mailing Address 2602 Lind St		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
-	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)		0.00

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	OUEDINE L. D. (EEO Easter OV)	_		
5	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 423 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statemen r for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Kendrick Juett Mailing Address 3000 Lincoln Hill N.e.	on Nam	е	Transaction ID: 4B10317.E25765 Date of Disbursement  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	ate	Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizat Kendrick Juett	on Nam	е	Transaction ID: 4B10317.E25425 Date of Disbursement
	Mailing Address 3000 Lincoln Hill N.e.			10
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organizati	on Nam	Δ	Transaction ID: 4B10317.E25426
C.	Huner Bill	onivani	C	Date of Disbursement
	Mailing Address 2432 Monroe			10
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
— D.	Full Name (Last, First, Middle Initial) / Full Organizat	on Nam	е	Transaction ID: 4B10317.E25427 Date of Disbursement
	Huner Wyatt			M M / D D / Y Y Y Y
	Mailing Address 2432 Monroe			10 30 2010
	City Sta	ite	Zip Code	Amount of Each Disbursement this Period
	Quincy		62301	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]		
E.	Full Name (Last, First, Middle Initial) / Full Organizati Neuser Kathy	on Nam	е	Transaction ID: 4B10317.E25428 Date of Disbursement
	Mailing Address 4333 S 24th St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Quincy		62301	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	CURTOTAL of Dishurasments This Dags (antique)			
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П	CHEDULE L-B (FEC Form 3X) EMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a 4c 4c 4d 4d 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Pfaffee Velma	ame	Transaction ID: 4B10317.E25429 Date of Disbursement
	Mailing Address 2912 Spring		10 M J D D J V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Helton Dawn	ame	Transaction ID: 4B10317.E25430 Date of Disbursement
	Mailing Address 460 E 1300th St		10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Payson IL	Zip Code 62360	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Helton Allsion	ame	Transaction ID: 4B10317.E25431 Date of Disbursement
	Mailing Address 460 E 1300th St		10 M / D D / Y Y Y Y Y Y
	City State Payson IL	Zip Code 62360	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Hyslop Harold	ame	Transaction ID: 4B10317.E25432 Date of Disbursement
	Mailing Address 615 S 19th		10 M / D D / Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	02301	Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25766 Date of Disbursement
	Hyslop Harold  Mailing Address 615 S 19th		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	52501	Account: LEVIN [MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 425 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements mar for commercial purposes, other than using the name and ac		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Nichols Richard	lame	Transaction ID: 4B10317.E25433 Date of Disbursement
	Mailing Address 2201 Sycamore		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Farha Aaron	lame	Transaction ID: 4B10317.E25434 Date of Disbursement
	Mailing Address 2043 Vermont		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Mollins Carol	lame	Transaction ID: 4B10317.E25435 Date of Disbursement
	Mailing Address 310 Lexington		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Mollins Carol	lame	Transaction ID: 4B10317.E25436 Date of Disbursement
	Mailing Address 310 Lexington		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organization N Mollins Carol	lame	Transaction ID: 4B10317.E26395 Date of Disbursement
	Mailing Address 310 Lexington		111 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
•	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

(	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 426 / 534
I	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	Any Information copied from such Reports and Statements may or for commercial purposes, other than using the name and add		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Mollins Carol	me	Transaction ID: 4B10317.E26104 Date of Disbursement
	Mailing Address 310 Lexington		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<del>-</del> В.	Full Name (Last, First, Middle Initial) / Full Organization Na	me	Transaction ID: 4B10317.E26396 Date of Disbursement
	Morrison Sam  Mailing Address 2241 College Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Morrison Sam	me	Transaction ID: 4B10317.E25437 Date of Disbursement
	Mailing Address 2241 College Ave		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL Purpose of Disbursement	62301	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Morrison Sam	me	Transaction ID: 4B10317.E25438 Date of Disbursement
	Mailing Address 2241 College Ave		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL Purpose of Disbursement	62301	20.00
_	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Moore Kyle	me	Transaction ID: 4B10317.E25439 Date of Disbursement
	Mailing Address 2897 Hampshire		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period
	Purpose of Disbursement	02301	20.00
-	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
-	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 427 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
-	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5 4b 4d
	any Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Moore Kyle	ame	Transaction ID: 4B10317.E25440 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2897 Hampshire		
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Moore Kyle	ame	Transaction ID: 4B10317.E25441 Date of Disbursement
	Mailing Address 2897 Hampshire		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	E HALoue (Lock Eigel Middle Leitel) (E.H.O. and a time M		Transaction ID: 4B10317.E26397
C.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Date of Disbursement
	Moore Kyle  Mailing Address 2897 Hampshire		111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_			Transaction ID: 4B10317.E26398
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Moore Kyle	ame	Date of Disbursement
	Mailing Address 2897 Hampshire		111
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26399
E.	Moore Kyle		Date of Disbursement
	Mailing Address 2897 Hampshire		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	CURTOTAL of Dishara amounts This Power (series all		
1	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 428 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements ma	uy not be sold or used by any pe	rson for the purpose of soliciting contributions
10	for commercial purposes, other than using the name and ad	dress of any political committee	to solicit contributions from such committee
$\setminus$	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
•	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25768 Date of Disbursement
Α.	Moore Kyle		
	Mailing Address 2897 Hampshire		10 M / 31 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25769
В.	Moore Kyle		Date of Disbursement
	Mailing Address 2897 Hampshire		10 31 / 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ama	Transaction ID: 4B10317.E26106
C.	Moore Kyle	arric	Date of Disbursement
	Mailing Address 2897 Hampshire		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26107
D.	Moore Kyle		Date of Disbursement
	Mailing Address 2897 Hampshire		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25444
E.	Neuser Luke		Date of Disbursement
	Mailing Address 4333 S 24th		10 30 / 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement	<del>_</del>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	CURTOTAL of Dishurcamente This David (antique)		
- [ `	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 429 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization No.	ame	Transaction ID: 4B10317.E25775 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 4333 S 24th		
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization No	ame	Transaction ID: 4B10317.E25776 Date of Disbursement
	Mailing Address 4333 S 24th		10 31 / Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_			Transaction ID: 4B10317.E25442
C.	Full Name (Last, First, Middle Initial) / Full Organization No.  Neuser Luke	ame	Date of Disbursement
	Mailing Address 4333 S 24th		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25443
D.	Neuser Luke	arric	Date of Disbursement
	Mailing Address 4333 S 24th		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62305	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]	
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Allen Rebecca	ame	<b>Transaction ID:</b> 4B10317.E25445 Date of Disbursement
	Mailing Address 32951 E 1400 North Rd		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Cullom IL	60929	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
⊢			
	SUBTOTAL of Disbursements This Page (optional)		0.00

IT C	CHEDULE L-B (FEC Form 3X) EMIZED DISBURSEMENTS OF LEVIN FUNDS		Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 430 / 534 (check only one)  4a 4c x 5 4d
	ny Information copied from such Reports and Statemen for commercial purposes, other than using the name an NAME OF COMMITTEE (In Full) Illinois Republican Party			
<b>∠</b> . <b>A</b> .	Full Name (Last, First, Middle Initial) / Full Organizati Blake Karla Mailing Address 858 Starlight Ct	on Nar	ne	Transaction ID: 4B10317.E25446 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta Herren IL	te	Zip Code 62948	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizati Blake Karla	on Nar	me	Transaction ID: 4B10317.E25447 Date of Disbursement
	Mailing Address 858 Starlight Ct			10 30 2010
	City Sta Herren IL	te	Zip Code 62948	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organizati Blake Karla	on Nar	me	Transaction ID: 4B10317.E25448 Date of Disbursement
	Mailing Address 858 Starlight Ct			M M / B B / Y Y Y Y Y Y
	City Sta Herren IL	te	Zip Code 62948	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizati Blake Karla	on Nar	me	Transaction ID: 4B10317.E26122 Date of Disbursement
	Mailing Address 858 Starlight Ct			M M / D D / Y Y Y Y
	City Sta Herren IL	te	Zip Code 62948	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organizati Blake Karla	on Nar	me	Transaction ID: 4B10317.E26123 Date of Disbursement
	Mailing Address 858 Starlight Ct			M M / D D / Y Y Y Y Y Y Y
	City Sta Herren IL	te	Zip Code 62948	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		32010	Account: LEVIN [MEMO ITEM]
s	UBTOTAL of Disbursements This Page (optional)			▶ 0.00

	OUEDINE L. D. (EEO Estres OV)	_		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 431 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation rage	4a 4c LX 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Blake Karla	Namo	е	Transaction ID: 4B10317.E26124 Date of Disbursement
	Mailing Address 858 Starlight Ct			11 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Herren IL		62948	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Blake Karla	Nam	е	Transaction ID: 4B10317.E25779 Date of Disbursement
	Mailing Address 858 Starlight Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Herren IL		62948	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Blake Karla	Name	e	Transaction ID: 4B10317.E25780 Date of Disbursement
	Mailing Address 858 Starlight Ct			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Herren IL		62948	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Blake Karla	Nam	е	Transaction ID: 4B10317.E25490 Date of Disbursement
	Mailing Address 858 Starlight Ct			10 M / 30 / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Herren IL		62948	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organization Blake Karla	Name	е	Transaction ID: 4B10317.E25491 Date of Disbursement
	Mailing Address 858 Starlight Ct			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Herren IL		62948	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			▶ 0.00
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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a  4c  x 5 4d 4d
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization NCIanahan Chase	Name	Transaction ID: 4B10317.E25781 Date of Disbursement
	Mailing Address 1108 East 5th St		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Metropolis IL	Zip Code 62960	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization No. Clanahan Chase  Mailing Address 1108 East 5th St	Name	Transaction ID: 4B10317.E25782 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Metropolis IL	Zip Code 62960	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25783 Date of Disbursement
	Mailing Address 1108 East 5th St		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Metropolis IL	Zip Code 62960	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25449 Date of Disbursement
	Mailing Address 1108 East 5th St		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Metropolis IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	62960	Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25450 Date of Disbursement
	Mailing Address 1108 East 5th St		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Metropolis IL	Zip Code 62960	Amount of Each Disbursement this Period 20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	_	R LINE NUMBER: PAGE 433 / 534
I.	TEMIZED DISBURSEMENTS		for each category of the	(cn	eck only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page		4a 4c 1x 5 4b 4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and				r the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
Α.	Full Name (Last, First, Middle Initial) / Full Organization Clanahan Chase	Nam	ne		Transaction ID: 4B10317.E25451 Date of Disbursement
	Mailing Address 1108 East 5th St				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State Metropolis IL		Zip Code 62960		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Clanahan Chase	Nam	ne		Transaction ID: 4B10317.E25452 Date of Disbursement
	Mailing Address 1108 East 5th St				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State Metropolis IL		Zip Code 62960		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement				Account: LEVIN
	Memo: Generic Gotv Incent Gift Card				[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Crabtree Adrienna	Nam	ne		Transaction ID: 4B10317.E25453 Date of Disbursement
	Mailing Address 1101 N Madison				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} & \begin{bmatrix} D & D \\ 3 & 0 \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State Marion IL		Zip Code 62959		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Crabtree Adrienna	Nam	ne		Transaction ID: 4B10317.E25454 Date of Disbursement
	Mailing Address 1101 N Madison				$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 3 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City State Marion IL		Zip Code 62959		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card				Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Crabtree Adrienna	Nam	ne		Transaction ID: 4B10317.E25785 Date of Disbursement
	Mailing Address 1101 N Madison				$\begin{bmatrix} M & M \\ 1 & 0 \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 3 & 1 \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City State Marion IL		Zip Code 62959		Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement				Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card				[MEMO ITEM]
- 1	SUBTOTAL of Disbursements This Page (optional)			<b>•</b>	0.00

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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 434 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS	Aggregation age	4b 4d 5
	ny Information copied from such Reports and Statements m r for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Crabtree Adrienna	lame	Transaction ID: 4B10317.E25786 Date of Disbursement
	Mailing Address 1101 N Madison		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25787 Date of Disbursement
	Mailing Address 1101 N Madison		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Crabtree Adrienna	lame	Transaction ID: 4B10317.E26125 Date of Disbursement
	Mailing Address 1101 N Madison		11 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E26126
D.	Crabtree Adrienna		Date of Disbursement
	Mailing Address 1101 N Madison		11 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	lama	Transaction ID: 4B10317.E26127
E.	Crabtree Adrienna	ranie	Date of Disbursement
	Mailing Address 1101 N Madison		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

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,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 435 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_		Aggregation Page	4a 4c 5
_	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
K	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26128 Date of Disbursement
A.	Crabtree Adrienna		
	Mailing Address 1101 N Madison		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement	02000	
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ama	Transaction ID: 4B10317.E25492
В.	Crabtree Adrienna		Date of Disbursement
			10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1101 N Madison		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN
_	Wichio. Generic Goty moont Gift Oard		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25493 Date of Disbursement
C.	Crabtree Adrienna		
	Mailing Address 1101 N Madison		10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25494
D.	Crabtree Adrienna		Date of Disbursement
	Mailing Address 1101 N Madison		10 0 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Ivialing Address 1101 IV Iviadisori		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25455
E.	Franklin Debra	• • •	Date of Disbursement
	Mailing Address 1101 N Madison		10 30 Y Y Y Y Y
	Mailing Address 1101 N Madison		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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-	SUBTOTAL of Disbursements This Page (optional)		0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a  4c  x 5
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Godwin Brittany	Name	Transaction ID: 4B10317.E25456 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M / D D / Y Y Y Y Y
	City State Hurst IL	Zip Code 62924	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Godwin Brittany	Name	Transaction ID: 4B10317.E25788 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Hurst IL	Zip Code 62924	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Godwin Brittany	Name	Transaction ID: 4B10317.E25789 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M / D D / Y Y Y Y Y
	City State Hurst IL	Zip Code 62924	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Godwin Brittany	Name	Transaction ID: 4B10317.E25495 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M / D D / Y Y Y Y Y
	City State Hurst IL	Zip Code 62924	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	02021	Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organization Godwin Brittany	Name	Transaction ID: 4B10317.E25806 Date of Disbursement
	Mailing Address 16183 Key Rd		10
	City State Hurst IL	Zip Code 62924	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 437 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS	Aggregation rage	4b 4d 4d
	Any Information copied from such Reports and Statements mor for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Godwin Rob	Name	Transaction ID: 4B10317.E25807 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Hurst IL	62924	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Godwin Rob	Name	Transaction ID: 4B10317.E25808 Date of Disbursement
	Mailing Address 16183 Key Rd		10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Hurst IL	62924	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Godwin Rob	Name	Transaction ID: 4B10317.E25496 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Hurst IL	62924	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25790 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Hurst IL	62924	20.00
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<b>Е</b> .	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25791 Date of Disbursement
	Mailing Address 16183 Key Rd		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Hurst IL	62924	20.00
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;	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 438 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	any Information copied from such Reports and Statements ma	v not be sold or used by any per	son for the purpose of soliciting contributions
	r for commercial purposes, other than using the name and ad-		
$ \Gamma $	NAME OF COMMITTEE (In Full)		
٦,	Illinois Republican Party		
Z	Full Name (Last First Middle Initial) / Full Organization Na		Transaction ID: 4B10317.E25457
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Godwin Rob	une	Date of Disbursement
	Mailing Address 16183 Key Rd		10
	Mailing Address 10105 Key Hd		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Hurst IL	62924	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25458
В.	Hope Joann		Date of Disbursement
	Mailing Address 1101 N Madison St		10 30 / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
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_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25459 Date of Disbursement
C.	Hope Joann		M M / D D / Y Y Y Y
	Mailing Address 1101 N Madison St		10 30 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
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	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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D.	Hope Joann	unc	Date of Disbursement
	Mailing Address 1101 N Madison St		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	Mailing Address 1101 N Madison Ot		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	me	Transaction ID: 4B10317.E25793
E.	Hope Joann		Date of Disbursement
	Mailing Address 1101 N Madison St		10 31 Y Y Y Y Y
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	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
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٤	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 439 / 534
I.	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
A	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Hope Joann	ame	Transaction ID: 4B10317.E26129 Date of Disbursement
	Mailing Address 1101 N Madison St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
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В.	Full Name (Last, First, Middle Initial) / Full Organization Na Hope Joann	ame	Transaction ID: 4B10317.E26130 Date of Disbursement
	Mailing Address 1101 N Madison St		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Hope Joann	ame	Transaction ID: 4B10317.E25809 Date of Disbursement
	Mailing Address 1101 N Madison St		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
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_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25810
D.	Hope Joann		Date of Disbursement
	Mailing Address 1101 N Madison St		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25811
E.	Hope Joann		Date of Disbursement
	Mailing Address 1101 N Madison St		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
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(	OF LEVIN FUNDS	'	Aggregation rage	4b 4d 4d
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	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Jackson Eric	Name	)	Transaction ID: 4B10317.E25812 Date of Disbursement
	Mailing Address E Sloan St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL		62946	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization   Jackson Eric	Name	)	<b>Transaction ID:</b> 4B10317.E25813 Date of Disbursement
	Mailing Address E Sloan St			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL		62946	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization   Jackson Eric	Name	)	<b>Transaction ID:</b> 4B10317.E26131 Date of Disbursement
	Mailing Address E Sloan St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL		62946	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Name	)	Transaction ID: 4B10317.E26132
D.	Jackson Eric			Date of Disbursement
	Mailing Address E Sloan St			M M / D D / Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL		62946	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Jackson Eric	Name	9	<b>Transaction ID:</b> 4B10317.E26133 Date of Disbursement
	Mailing Address E Sloan St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL		62946	20.00
	Purpose of Disbursement			Account: LEVIN
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Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Kelley Mark  Mailing Address 1101 N Madison St  City State Zip Code Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25461 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	_			
Transaction ID: 4810317.E26134  Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee in the using the name and address of any political committee to solicit contributions from such committee in the using the name and address of any political committee to solicit contributions from such committee in the using the name and address of any political committee to solicit contributions from such committee in the purpose of soliciting contributions from such committee in the purpose of soliciting contributions from such committee in the purpose of soliciting contributions from such committee in the purpose of soliciting contributions from such committee in the purpose of soliciting contributions from such committee in the purpose of soliciting contributions from such committee in the purpose of soliciting contributions from such committee in the purpose of Disbursement in this Period Date of Disbursement in the Purpose of Disbursement in Purpose of Disbursement i		•	Use separate schedule(s)	
Amount of Each Disbursement Memo: Generic Gotv Incent Gift Card    City   State   Zip Code   Harrisburg   It   62946   Har	ľ	TEMIZED DISBURSEMENTS		
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)  Illinois Republican Party  In Illaname (Last, First, Middle Initial) / Full Organization Name  Jackson Eric  City State Zip Code Harrisburg IL 62946  B. Full Name (Last, First, Middle Initial) / Full Organization Name  Account: LEVIN [MEMO ITEM]  Full Name (Last, First, Middle Initial) / Full Organization Name  Jackson Eric  City State Zip Code Harrisburg IL 62946  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Meno: Generic Golot Incent Gift Card  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Meno: Generic Golot Incent Gift Card  City State Zip Code Harrisburg IL 62946  Amount of Each Disbursement this Period  City State Zip Code Harrisburg IL 62946  City State Zip Code Harrisburg IL 62946  City State Zip Code Harrisburg IL 62946  Amount of Each Disbursement IN Period  City State Zip Code Harrisburg IL 62946  City State Zip Code Harrisburg IL 62946  Amount of Each Disbursement IN Period  City State Zip Code Harrisburg IL 62946  Amount of Each Disbursement IN Period  City State Zip Code Harrisburg IL 62946  City State Zip Code Harrisburg IL 62946  Amount of Each Disbursement IN Period  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madison St  City State Zip Code Mailing Address I 101 N Madiso		OF LEVIN FUNDS	Aggregation Page	
Illinois Republican Party   Illinois Republican Party				rson for the purpose of soliciting contributions
A. Jackson Eric  Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  B. Jackson Eric  Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  B. Jackson Eric  Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  B. Jackson Eric  Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Harrisburg IL 62946  CIty State Zip Code Harrisburg IL 62946  CIty State Zip Code Harrisburg IL 62946  Date of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  D. Kelley Mark  Mailing Address I 1101 N Madison St  City State Zip Code Marion ID: 4810317.E25461  Date of Disbursement Incentification Name  D. Kelley Mark  Mailing Address I 1101 N Madison St  City State Zip Code Marion ID: 4810317.E25461  Date of Disbursement Incentification Name  D. Kelley Mark  Mailing Address I 1101 N Madison St  City State Zip Code Marion ID: 4810317.E25461  Date of Disbursement Incentification ID: 4810317.E25461  Date of Disbursement ID: 4810317.E25462  Date of		` '		
Mailing Address   E Sloan St	A.	, , , , , , , , , , , , , , , , , , , ,	ame	Date of Disbursement
Harrisburg IL 62946 Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  B. Full Name (Last, First, Middle Initial) / Full Organization Name Jackson Eric Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  C. Jackson Eric Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  C. Jackson Eric Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  C. Jackson Eric Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  C. Jackson Eric Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  D. City State Zip Code Account: LEVIN [MEMO ITEM]  D. Kelley Mark Mailing Address 1101 N Madison St  City State Zip Code Account: LEVIN [MEMO ITEM]  D. City State Zip Code Account: LEVIN [MEMO ITEM]  E. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Kelley Mark Mailing Address 1101 N Madison St  City State Zip Code Account: LEVIN [MEMO ITEM]  E. Full Name (Last, First, Middle Initial) / Full Organization Name  E. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Account: LEVIN [MEMO ITEM]  E. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Account: LEVIN [MEMO ITEM]  D. City State Zip Code Account: LEVIN [MEMO ITEM]  D. City State Zip Code And Count: LEVIN [MEMO ITEM]  D. City State Zip Code And Count: LEVIN [MEMO ITEM]  D. City State Zip Code And Count: LEVIN [MEMO ITEM]  D. City State Zip Code And Count: LEVIN [MEMO ITEM]		Mailing Address E Sloan St		111 01 7 2010
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Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Jackson Eric  City State Zip Code Harrisburg IL 62946  Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E26161 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E26161 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25461 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25461 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25461 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25461 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  E. Full Name (Last, First, Middle Initial) / Full Organization Name  Kelley Mark  Mailing Address 1101 N Madison St  City State Zip Code Marion IL 62959  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25462 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25462 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]		Harrisburg IL	62946	20.00
B. Full Name (Last, First, Middle Initial) / Full Organization Name  Jackson Eric  Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  Purpose of Disbursement Memo: Generic Gorv Incent Gift Card  City State Zip Code Harrisburg IL 62946  C. Jackson Eric  Mailing Address E Sloan St  City State Zip Code Harrisburg IL 62946  City State Zip Code Harrisburg IL 62946  Date of Disbursement this Period  Transaction ID: 4B10317.E25461  Date of Disbursement this Period  Transaction ID: 4B10317.E26161  Date of Disbursement  Memo: Generic Gorv Incent Gift Card  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Marion IL 62959  Purpose of Disbursement Memo: Generic Gorv Incent Gift Card  City State Zip Code Marion IL 62959  Purpose of Disbursement Memo: Generic Gorv Incent Gift Card  Mailing Address 1101 N Madison St  E. Kelley Mark  Mailing Address 1101 N Madison St  City State Zip Code Marion IL 62959  Purpose of Disbursement Memo: Generic Gorv Incent Gift Card  Mailing Address 1101 N Madison St  City State Zip Code Marion IL 62959  Purpose of Disbursement Memo: Generic Gorv Incent Gift Card  City State Zip Code Marion IL 62959  Purpose of Disbursement this Period Date of Disbursement thi				Account: LEVIN
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	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organizati Ragain Joy	on Nan	ne	Transaction ID: 4B10317.E26411 Date of Disbursement
	Mailing Address 1113 Folgers St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Marion IL		62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizati Ragain Joy	on Nan	ne	Transaction ID: 4B10317.E26142 Date of Disbursement
	Mailing Address 1113 Folgers St			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Marion IL		62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organizati Ragain Joy	on Nan	ne	Transaction ID: 4B10317.E26143 Date of Disbursement
	Mailing Address 1113 Folgers St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	Marion IL		62959	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizati Ramsey Sandra	on Nan	ne	Transaction ID: 4B10317.E25798 Date of Disbursement
	Mailing Address 209 N Anna St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	West Frankfort IL		62896	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organizati Ramsey Sandra	on Nan	ne	Transaction ID: 4B10317.E25799 Date of Disbursement
	Mailing Address 209 N Anna St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	te	Zip Code	Amount of Each Disbursement this Period
	West Frankfort IL		62896	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

_				
S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 446 / 534
I.	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
Α	ny Information copied from such Reports and Statemer			
0	r for commercial purposes, other than using the name a	nd add	lress of any political committee	to solicit contributions from such committee
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Ramsey Sandra	ion Nar	me	Transaction ID: 4B10317.E25800 Date of Disbursement
	Mailing Address 209 N Anna St			10 M / D D / Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	West Frankfort IL		62896	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizat Ramsey Sandra	ion Nai	me	Transaction ID: 4B10317.E26147 Date of Disbursement
	Mailing Address 209 N Anna St			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	West Frankfort IL		62896	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organizat	ion Nar	me	Transaction ID: 4B10317.E26148
C.	Ramsey Sandra			Date of Disbursement
	Mailing Address 209 N Anna St			M M / D D / Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	West Frankfort IL		62896	20.00
	Purpose of Disbursement Memo: Generic Goty Incent Gift Card			Account: LEVIN
_	- Werld. Generic Goty incent Gift Gard			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Ramsey Sandra	ion Nar	me	Transaction ID: 4B10317.E26149 Date of Disbursement
	Mailing Address 209 N Anna St			M M / D D / Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	West Frankfort IL		62896	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organizat	ion Na	me	Transaction ID: 4B10317.E25470
E.	Ramsey Sandra			Date of Disbursement
	Mailing Address 209 N Anna St			10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	West Frankfort IL		62896	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

_	COUEDING L. D. (EEO Eown OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 447 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS		Aggregation age	4b 4d 5
	Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiz Ramsey Sandra	ation Na	me	Transaction ID: 4B10317.E25471 Date of Disbursement
	Mailing Address 209 N Anna St			M M / D D / Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
		IL	62896	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN [MEMO ITEM]
_				-
В.	Full Name (Last, First, Middle Initial) / Full Organiz Ramsey Sandra	ation Na	ame	Transaction ID: 4B10317.E25472 Date of Disbursement
	Mailing Address 209 N Anna St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
		IL	62896	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Ramsey Sandra	ation Na	ame	Transaction ID: 4B10317.E25473 Date of Disbursement
	Mailing Address 209 N Anna St			M M / B B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State	Zip Code	Amount of Each Disbursement this Period
		IL	62896	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Ramsev Mike	ation Na	ame	Transaction ID: 4B10317.E25474 Date of Disbursement
	Mailing Address 209 N Anna St			10 M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	West Frankfort	IL	62896	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>–</b> Е.	Full Name (Last, First, Middle Initial) / Full Organiz	ation Na	ıme	Transaction ID: 4B10317.E25475 Date of Disbursement
	Ramsey Mike  Mailing Address 209 N Anna St			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	IL	62896	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional) .			0.00

lmaç	ge# 11990327143		
П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 448 / 534 (check only one)  4a  4c  x 5
	ny Information copied from such Reports and Statements n for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization I Ramsey Mike  Mailing Address 209 N Anna St	Name	Transaction ID: 4B10317.E25476 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State West Frankfort IL	Zip Code 62896	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization I Ramsey Mike	Name	Transaction ID: 4B10317.E26412 Date of Disbursement
	Mailing Address 209 N Anna St		11 02 2010
	City State West Frankfort IL	Zip Code 62896	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization I Ramsey Mike	Name	Transaction ID: 4B10317.E26413 Date of Disbursement
	Mailing Address 209 N Anna St		M M M / D D / Y Y Y Y Y Y
	City State West Frankfort IL	Zip Code 62896	Amount of Each Disbursement this Period 10.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization I Ramsey Mike	Name	Transaction ID: 4B10317.E26145 Date of Disbursement
	Mailing Address 209 N Anna St		M M / D D / Y Y Y Y Y
	City State West Frankfort IL	Zip Code 62896	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization I Ramsey Mike	Name	Transaction ID: 4B10317.E26146 Date of Disbursement
	Mailing Address 209 N Anna St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State West Frankfort IL	Zip Code 62896	Amount of Each Disbursement this Period 20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ţ	SUBTOTAL of Disbursements This Page (optional)		0.00

_	SOUEDINE L. D. (FEO. Farms OV)	-		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 449 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS		Aggregation rage	4b 4d 4d
	any Information copied from such Reports and Statement for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza Ramsey Mike	ation Nan	ne	Transaction ID: 4B10317.E25795 Date of Disbursement
	Mailing Address 209 N Anna St			10 M / D D / Y Y Y Y Y
	,	tate	Zip Code	Amount of Each Disbursement this Period
		L	62896	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nan	ne	Transaction ID: 4B10317.E25796 Date of Disbursement
	Mailing Address 209 N Anna St			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	tate	Zip Code	Amount of Each Disbursement this Period
	West Frankfort	L	62896	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiza Ramsey Mike	ation Nan	ne	Transaction ID: 4B10317.E25797 Date of Disbursement
	Mailing Address 209 N Anna St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	tate	Zip Code	Amount of Each Disbursement this Period
		L	62896	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nan	ne	Transaction ID: 4B10317.E26144 Date of Disbursement
	Mailing Address 209 N Anna St			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	tate	Zip Code	Amount of Each Disbursement this Period
		L	62896	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nan	ne	Transaction ID: 4B10317.E26150 Date of Disbursement
	Mailing Address 1700 Doctor Springs Rd			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	tate	Zip Code	Amount of Each Disbursement this Period
	Desoto	L	62924	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

_	SOUEDIUE L. D./EEO Estina OV	-		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 450 / 534 (check only one)
I.	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation Fage	4a 4c Lx 5
	ny Information copied from such Reports and Statemer for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nar	me	Transaction ID: 4B10317.E25477 Date of Disbursement
	Mailing Address 1700 Doctor Springs Rd			10 M / D D / Y Y Y Y Y
	City S Desoto I	tate L	Zip Code 62924	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>–</b> В.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nar	me	Transaction ID: 4B10317.E25478 Date of Disbursement
	Mailing Address 1101 N Madison St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City S Marion I	tate L	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiza Smith Joel	ation Nar	me	Transaction ID: 4B10317.E25479 Date of Disbursement
	Mailing Address 1101 N Madison St			10 M / D D / Y Y Y Y Y
	,	tate L	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	<u> </u>	02000	Account: LEVIN [MEMO ITEM]
<b>–</b> D.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nar	me	Transaction ID: 4B10317.E26155 Date of Disbursement
	Mailing Address 1101 N Madison St			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	tate L	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	_	02000	Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organiza	ation Nar	me	Transaction ID: 4B10317.E25801 Date of Disbursement
	Mailing Address 1101 N Madison St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		tate L	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		3-000	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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I	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a  4c  x 5 4d
	ny Information copied from such Reports and Statements may for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Smith Joel	ame	Transaction ID: 4B10317.E25802 Date of Disbursement
	Mailing Address 1101 N Madison St		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Swatschero David	ame	Transaction ID: 4B10317.E25803 Date of Disbursement
	Mailing Address 1101 N Madison St  City State	Zip Code	1 0 3 1 2 0 1 0  Amount of Each Disbursement this Period
	Marion IL Purpose of Disbursement	62959	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Swatschero David	ame	Transaction ID: 4B10317.E26156 Date of Disbursement
	Mailing Address 1101 N Madison St		11 01 7 2010
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Swatschero David	ame	Transaction ID: 4B10317.E26157 Date of Disbursement
	Mailing Address 1101 N Madison St		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization N Swatschero David	ame	Transaction ID: 4B10317.E25480 Date of Disbursement
	Mailing Address 1101 N Madison St		10 M / D D / Y Y Y Y Y
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ţ	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

_	COUEDING L D (FEO Forms OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 452 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Staten r for commercial purposes, other than using the nam			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organi. Swatschero David	zation Na	me	Transaction ID: 4B10317.E25481 Date of Disbursement
	Mailing Address 1101 N Madison St			M M / D D / Y Y Y Y Y Y
	City	State IL	Zip Code	Amount of Each Disbursement this Period
	Marion	IL	62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Swearingen Matt	zation Na	me	Transaction ID: 4B10317.E25482 Date of Disbursement
	Mailing Address 1101 E Grand Ave, Ste 1			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Carbondale	IL	62901	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organi. Talbert David	zation Na	me	Transaction ID: 4B10317.E25483 Date of Disbursement
	Mailing Address 1101 N Madison St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Marion	IL	62959	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi. Talbert David	zation Na	me	Transaction ID: 4B10317.E26158 Date of Disbursement
	Mailing Address 1101 N Madison St			111 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Marion	IL	62959	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organi. Thorpe David	zation Na	me	Transaction ID: 4B10317.E25484 Date of Disbursement
	Mailing Address 1101 N Madison St			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	Marion	IL	62959	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

Ì			
S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 453 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements ma	v not be sold or used by any per	son for the purpose of soliciting contributions
	for commercial purposes, other than using the name and ad		
Λ	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
~	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	<b>Transaction ID:</b> 4B10317.E25485
A.	Thorpe David		Date of Disbursement
	Mailing Address 1101 N Madison St		10 30 / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
ь	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25804 Date of Disbursement
B.	Thorpe David		
	Mailing Address 1101 N Madison St		10
	01.	7'- 0-4-	Amount of Each Disbursement this Period
	City State Marion IL	Zip Code 62959	
		02939	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
_			-
C.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25805 Date of Disbursement
_	Thorpe David		M M / D D / Y Y Y Y
	Mailing Address 1101 N Madison St		31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25486
D.	Yackey Beverly		Date of Disbursement
	Mailing Address Box 252		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN
_			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E26160 Date of Disbursement
	Yackey Beverly		M M / D D / Y Y Y
	Mailing Address Box 252		11 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Marion IL	62959	20.00
	Purpose of Disbursement	<u></u>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	CURTOTAL of Dishura amounts This Days (series all		
1	SUBTOTAL of Disbursements This Page (optional)		0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 454 / 534
ı	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
	OF LEVIN FUNDS	Aggregation Page	4a
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Birkhead Tom	ame	Transaction ID: 4B10317.E26118 Date of Disbursement
	Mailing Address 1101 N Madison		M M / D D / Y Y Y Y Y Y
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Birkhead Tom	ame	Transaction ID: 4B10317.E26119 Date of Disbursement
	Mailing Address 1101 N Madison		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Birkhead Tom	ame	Transaction ID: 4B10317.E26120 Date of Disbursement
	Mailing Address 1101 N Madison		M M / D D / Y Y Y Y Y
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Birkhead Tom	ame	Transaction ID: 4B10317.E26121 Date of Disbursement
	Mailing Address 1101 N Madison		M M / D D / Y Y Y Y Y Y
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Birkhead Tom	ame	Transaction ID: 4B10317.E25487 Date of Disbursement
	Mailing Address 1101 N Madison		10
	City State Marion IL	Zip Code 62959	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

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	CHEDULE L-B (FEC Form 3X)		se separate schedule(s)	FOR LINE NUMBER: PAGE 455 / 534 (check only one)
П	TEMIZED DISBURSEMENTS		or each category of the grant	4a  4c x 5
C	OF LEVIN FUNDS	^	ggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statements n for commercial purposes, other than using the name and a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Birkhead Tom	Name		Transaction ID: 4B10317.E25488 Date of Disbursement
	Mailing Address 1101 N Madison			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Marion IL		62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Birkhead Tom	Name		Transaction ID: 4B10317.E25489 Date of Disbursement
	Mailing Address 1101 N Madison			10
	City State		Zip Code	Amount of Each Disbursement this Period
	Marion IL		62959	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Birkhead Tom	Name		Transaction ID: 4B10317.E25777 Date of Disbursement
	Mailing Address 1101 N Madison			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Marion IL		62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	Name		Transaction ID: 4B10317.E25778 Date of Disbursement
	Birkhead Tom  Mailing Address 1101 N Madison			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Marion IL		62959	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organization	Name		Transaction ID: 4B10317.E25501 Date of Disbursement
	Sous Victoria  Mailing Address 649 Trace Dr.apt 2			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		Zin Codo	Amount of Each Disbursement this Period
	City State Buffalo Grove IL		Zip Code 60089	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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{	SUBTOTAL of Disbursements This Page (optional)			0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 456 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX 5   4d   4d
	Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Sous Victoria	ion Na	me	Transaction ID: 4B10317.E25502 Date of Disbursement
	Mailing Address 649 Trace Dr.apt 2			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	ate	Zip Code	Amount of Each Disbursement this Period
	Buffalo Grove IL		60089	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizat Chada Mike	ion Na	me	Transaction ID: 4B10317.E25505 Date of Disbursement
	Mailing Address 426 Inverrrary Lane			10 M / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Deerfield IL		60015	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organizat Geha Georgette	ion Na	me	Transaction ID: 4B10317.E25506 Date of Disbursement
	Mailing Address 9421 Kostner			10 M / 31 / Y Y Y Y Y
	•	ate	Zip Code	Amount of Each Disbursement this Period
	Skokie IL		60076	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Geha Georgette	ion Na	me	Transaction ID: 4B10317.E25507 Date of Disbursement
	Mailing Address 9421 Kostner			10 M / 31 / Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Skokie IL	•	60076	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>Е</b> .	Full Name (Last, First, Middle Initial) / Full Organizat Parashchak Dan	ion Na	me	Transaction ID: 4B10317.E25513 Date of Disbursement
	Mailing Address 202 W. 79th Street			10
	City Sta Willowbrook IL	ate	Zip Code 60527	Amount of Each Disbursement this Period
	Purpose of Disbursement		00327	20.00
-	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 457 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS		Aggregation age	4b 4d 4d
	ny Information copied from such Reports and Statem r for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiz Parashchak Dan	ation Na	ame	Transaction ID: 4B10317.E25514 Date of Disbursement
	Mailing Address 202 W. 79th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
		IL	60527	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Parashchak Dan	ation Na	ame	Transaction ID: 4B10317.E25515 Date of Disbursement
	Mailing Address 202 W. 79th Street			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Willowbrook	IL	60527	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Parashchak Dan	ation Na	ame	Transaction ID: 4B10317.E25817 Date of Disbursement
	Mailing Address 202 W. 79th Street			M M / D D / Y Y Y Y Y Y
	,	State	Zip Code	Amount of Each Disbursement this Period
		IL	60527	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Rubin Gabe	ation Na	ame	Transaction ID: 4B10317.E25521 Date of Disbursement
	Mailing Address 4450 Davis St			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
		IL	60076	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Rubin Gabe	ation Na	ame	Transaction ID: 4B10317.E25522 Date of Disbursement
	Mailing Address 4450 Davis St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
		<u>L</u>	60076	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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- [ 3	<b>SUBTOTAL</b> of Disbursements This Page (optional) .			0.00

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S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 458 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_		Aggregation Page	4a 4c x 5
_	OF LEVIN FUNDS		4b 4d
	any Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ad		
k	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25523 Date of Disbursement
	Rubin Gabe		M M / D D / Y Y Y Y
	Mailing Address 4450 Davis St		10 M / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Skokie IL	60076	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26185 Date of Disbursement
В.	Rubin Gabe		
	Mailing Address 4450 Davis St		111 02 7 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Skokie IL	60076	20.00
		00070	
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN
_	Memo. Generic Goty incent Girt Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26186 Date of Disbursement
•	Rubin Gabe		M M / D D / Y Y Y Y
	Mailing Address 4450 Davis St		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Skokie IL	60076	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26184
D.	Rubin Gabe		Date of Disbursement
	Mailing Address 4450 Davis St		1 1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Walling Address 4450 Davis St		77 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Skokie IL	60076	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25546
E.	Rubin Gabe		Date of Disbursement
	Mailing Address 4450 Davis St		10 31 Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Skokie IL	60076	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Γ	CURTOTAL of Dishura amonte This Dans (autions)		
	SUBTOTAL of Disbursements This Page (optional)		0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 459 / 534
ı	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
_		Aggregation Page	4a
_	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
K	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25547 Date of Disbursement
Α.	Rubin Gabe		M M / D D / Y Y Y Y
	Mailing Address 4450 Davis St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Skokie IL	60076	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25524
В.	Rubin Daniel		Date of Disbursement
	Mailing Address 8934 Samoset		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	011	7'- 01-	Amount of Each Disbursement this Period
	City State	Zip Code	
	Skokie IL	60076	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25525 Date of Disbursement
C.	Murphy Molly		
	Mailing Address 14 White Barn Rd.		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vernon Hills IL	60061	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25526
D.	Murphy Molly		Date of Disbursement
	Mailing Address 14 White Barn Rd.		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vernon Hills IL	60061	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25527
E.	Murphy Molly		Date of Disbursement
	Mailing Address 14 White Barn Rd.		10 31 7 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Vernon Hills IL	60061	20.00
	Purpose of Disbursement		
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN
۲			[MEMO ITEM]
1	$\textbf{SUBTOTAL} \ \ \text{of Disbursements This Page (optional)} \$		0.00

5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 460 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5
	any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organi Murphy Molly	zation Na	nme	Transaction ID: 4B10317.E26167 Date of Disbursement
	Mailing Address 14 White Barn Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Vernon Hills	State IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Murphy Molly	zation Na	ame	Transaction ID: 4B10317.E26168 Date of Disbursement
	Mailing Address 14 White Barn Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Vernon Hills	State IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organi Murphy Molly	zation Na	me	Transaction ID: 4B10317.E26169 Date of Disbursement
	Mailing Address 14 White Barn Rd.			M M / D D / Y Y Y Y Y
	City Vernon Hills	State IL	Zip Code 60061	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi Radke Rosemary	zation Na	ame	Transaction ID: 4B10317.E25531 Date of Disbursement
	Mailing Address 1064 Copperstone Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Northbrook	State IL	Zip Code 60062	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organi Simon Nick	zation Na	ame	Transaction ID: 4B10317.E25540 Date of Disbursement
	Mailing Address 782 Greenwood Road			10 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Northbrook	State IL	Zip Code 60062	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	-		Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
1	SUBTOTAL of Disbursements This Page (optional)			0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 461 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
(	OF LEVIN FUNDS		Aggregation age	4b 4d 5
	Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organiz	zation Na	me	Transaction ID: 4B10317.E25541 Date of Disbursement
	Mailing Address 782 Greenwood Road			10 M / 31 / Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
	Northbrook	IL	60062	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Simon Nick	ation Na	me	Transaction ID: 4B10317.E25542 Date of Disbursement
	Mailing Address 782 Greenwood Road			1 0 M / 3 1 / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Northbrook	IL	60062	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organiz Tampson Stephanie	zation Na	me	Transaction ID: 4B10317.E25543 Date of Disbursement
	Mailing Address 8801 N Wisner St			10 M / 31 / Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
	Niles	IL	60714	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Tampson Stephanie	zation Na	me	Transaction ID: 4B10317.E25544 Date of Disbursement
	Mailing Address 8801 N Wisner St			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Niles	IL	60714	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Tampson Stephanie	zation Na	me	Transaction ID: 4B10317.E25545 Date of Disbursement
	Mailing Address 8801 N Wisner St			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	Niles	IL	60714	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

Mailing Address   10341 S. 51st Ct.	_	COLLED LE L. D. (EEO Es OV)	_		,
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicting committees for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.  A. Full Name (Last, First, Middle Initial) / Full Organization Name  A. Full Name (Last, First, Middle Initial) / Full Organization Name  A. Full Name (Last, First, Middle Initial) / Full Organization Name  A. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Stratis Alyssa  Mailing Address 10341 S. 51st Ct.  City State Zip Code Oak Lawn  Durpose of Disbursement Memo: Genetic Got/ Incent Gift Card  City State Zip Code Oak Lawn  Name Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Transaction ID: 4810317.E26209  Deter of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E26210  Date of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E26210  Date of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E26210  Date of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E26211  Date of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E26211  Date of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E26211  Date of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E26211  Date of Disbursement this Period Oak Lawn  Name Organization Name  Transaction ID: 4810317.E25856  Date of Disbursement ID: 4810317.		•		Use separate schedule(s)	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee to solicit contributions from such committee.    NAME OF COMMITTEE (in Full)	ľ	TEMIZED DISBURSEMENTS			
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for for commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee or for for commencial purposes of soliciting contributions from such committee or for for more detailed in the property of the purpose of State (Inc.).  An and the purpose of Disbursement in Period (Inc.). The purpose of Disbursement in Period (Inc.). The purpose of Disbursement in Period (Inc.). The purpose of Disbursement (Inc.). The		OF LEVIN FUNDS		Aggregation Fage	_ <del>_</del>
Illinois Republican Party					son for the purpose of soliciting contributions
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SCHEDULE L-B. (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS  Agregation Page OF LEVIN FUNDS  Agregation Page OF LEVIN FUNDS  Agregation Page  Agregation	_	00115D11151 D (550 5 000)		
Transaction ID: 4810317.E26217  Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicting committees for for commercial purposes, other than using the name and address of any political committee to solicit combibutions from such committees. The commercial purposes, other than using the name and address of any political committee to solicit combibutions from such committee.  A. Full Name (Last, First, Middle Initial) / Full Organization Name  A. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Chicago IL 60638  Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Chicago IL 60638  City State Zip Code Chicago IL 60638  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Chicago IL 60638  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code IL 60464  Purpose of Disbursement  Memo: Generic Got/ Incent Gift Card  City State Zip Code IL 60464  Purpose of Disbursement  Memo: Generic Got/ Incent Gift Card  City State Zip Code IL 60464  Purpose of Disbursement  Memo: Generic Got/ Incent Gift Card  City State Zip Code IL 60464  Purpose of Disbursement  Memo: Generic Got/ Incent Gift Card  Anount of Each Disbursement this Period Disbursement  Memo: Generic Got/ Incent Gift Card  Anount of Each Disbursement This Period Disbursement  Memo: Generic Got/ Incent Gift Card  Anount of Each Disbursement This Period Disbursement  Memo: Generic Got/ Incent Gift Card  Anount of Each Disbursement This Period Disbursement  Memo: Generic Got/ Incent Gift Card  Anount of Each Disbursement This Period Disbursement  Memo: Generic Got/ Incent Gift Card  Anount of Each Disbursement This Period Disbursement  Memo: Generic Got/ Incent Gift Card  Anount of Each Disbursement This Period Disbursement  Memo: Gene		•	Use separate schedule(s)	
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	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Hills IL	60465	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Na Schaible Matt	me	Transaction ID: 4B10317.E25563 Date of Disbursement
	Mailing Address 8846 S. Hamilton		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60643	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Schaible Matt	me	Transaction ID: 4B10317.E25866 Date of Disbursement
	Mailing Address 8846 S. Hamilton		1 1 D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60643	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Schaible Matt	ime	Transaction ID: 4B10317.E25867 Date of Disbursement
	Mailing Address 8846 S. Hamilton		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Chicago IL	60643	20.00
	Purpose of Disbursement	<del>-</del>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
T-	SUBTOTAL of Disbursements This Page (optional)		
٦	TOTAL OF DISDUISEMENTS THIS FAGE (OPLIONAL)		0.00

	C# 11990327101			
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 466 / 534 (check only one)
	EMIZED DISBURSEMENTS OF LEVIN FUNDS		for each category of the Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statem for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiz Schaible Matt	ation Na	ame	Transaction ID: 4B10317.E25868 Date of Disbursement
	Mailing Address 8846 S. Hamilton			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60643	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organia	ation Na	ame	Transaction ID: 4B10317.E25869 Date of Disbursement
	Mailing Address 8846 S. Hamilton			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60643	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Roupas Mike	ation Na	ame	Transaction ID: 4B10317.E26204 Date of Disbursement
	Mailing Address 9825 W. Circle Parkway			M M / D D / Y Y Y Y Y
	City Palos Park	State IL	Zip Code 60464	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Roupas Mike	ation Na	ame	Transaction ID: 4B10317.E26205 Date of Disbursement
	Mailing Address 9825 W. Circle Parkway			M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	State IL	Zip Code 60464	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	<u> </u>	30101	Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organia Roupas Mike	ation Na	ame	Transaction ID: 4B10317.E26206 Date of Disbursement
	Mailing Address 9825 W. Circle Parkway			111
	,	State IL	Zip Code 60464	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Ę	SUBTOTAL of Disbursements This Page (optional)			<b>▶</b> 0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a  4c  x 5
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Name (Mast, First, Middle Initial) / Full Organization Name (Last, First, First, Middle Initial) / Full Organization Name (Last, First, Firs	Name	Transaction ID: 4B10317.E25567 Date of Disbursement
	Mailing Address 9825 W. Circle Parkway		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Park IL	Zip Code 60464	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25568 Date of Disbursement
	Mailing Address 9825 W. Circle Parkway		10 M A A A A A A A A A A A A A A A A A A
	City State Palos Park IL	Zip Code 60464	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25569 Date of Disbursement
	Mailing Address 9825 W. Circle Parkway		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Park IL	Zip Code 60464	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Anderson Janice	Name	Transaction ID: 4B10317.E25571 Date of Disbursement
	Mailing Address 1527 Wedgefield Circle		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Naperville IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	60563	Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25885 Date of Disbursement
	Mailing Address 1527 Wedgefield Circle		11 0 1 7 2 0 1 0
	City State Naperville IL	Zip Code 60563	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
1 5	SUBTOTAL of Disbursements This Page (optional)		0.00

_	COUEDING L. D. (EEO E OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 468 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
1	Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Z	<u> </u>			ID 40447 F05000
A.	Full Name (Last, First, Middle Initial) / Full Organ Atkinson Kory	ization Na	ıme	Transaction ID: 4B10317.E25886 Date of Disbursement
	Mailing Address 160 Brendon Ct.			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Roselle	IL	60172	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Atkinson Kory	ization Na	me	Transaction ID: 4B10317.E25572 Date of Disbursement
	Mailing Address 160 Brendon Ct.			10
	City	State	Zip Code	Amount of Each Disbursement this Period
	Roselle	IL	60172	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	5 HAL			Transaction ID: 4B10317.E25577
C.	Full Name (Last, First, Middle Initial) / Full Organ Emerson Masters Debra	ization Na	ame	Date of Disbursement
	Mailing Address 205 E. Butterfield Rd.			10 M / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Elmhurst	IL	60126	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_				Transaction ID: 4B10317.E25578
D.	Full Name (Last, First, Middle Initial) / Full Organ Emerson Masters Debra	ization Na	ame	Date of Disbursement
	Mailing Address 205 E. Butterfield Rd.			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Elmhurst	IL	60126	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organ	ization Na	ime	Transaction ID: 4B10317.E25579
E.	Emerson Masters Debra	.24.10111140		Date of Disbursement
	Mailing Address 205 E. Butterfield Rd.			10 31 7 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Elmhurst	IL	60126	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
۲	OUDTOTAL of Disharana at Till Day of the Co			
	SUBTOTAL of Disbursements This Page (optional)			0.00

	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 469 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza Emerson Masters Debra	ation Na	me	Transaction ID: 4B10317.E25891 Date of Disbursement
	Mailing Address 205 E. Butterfield Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	state	Zip Code	Amount of Each Disbursement this Period
		L	60126	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza Emerson Masters Debra	ation Na	me	Transaction ID: 4B10317.E25892 Date of Disbursement
	Mailing Address 205 E. Butterfield Rd.			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	state	Zip Code	Amount of Each Disbursement this Period
	Elmhurst I	L	60126	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiza Giorno Sharon	ation Na	me	Transaction ID: 4B10317.E25580 Date of Disbursement
	Mailing Address 211 Gazebo Lane			10 M / 31 / Y Y Y Y Y Y
	City	state	Zip Code	Amount of Each Disbursement this Period
		L	60148	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiza Goers Richard	ation Na	me	Transaction ID: 4B10317.E25581 Date of Disbursement
	Mailing Address 234 N. Quincy			10 M / D D / Y Y Y Y Y Y
	City	state	Zip Code	Amount of Each Disbursement this Period
		L	60521	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organiza	ation Na	me	Transaction ID: 4B10317.E25582
E.	Goers Richard			Date of Disbursement
	Mailing Address 234 N. Quincy			10 M / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		tate L	Zip Code 60521	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card	_		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 470 / 534
	TEMIZED DISBURSEMENTS OF LEVIN FUNDS	for each category of the Aggregation Page	(check only one)  4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statements mr for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Nager Jeffrey	Name	Transaction ID: 4B10317.E25583 Date of Disbursement
	Mailing Address 2136 W Lemoyne		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Chicago IL	Zip Code 60622	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25584 Date of Disbursement
	Mailing Address 2670 Yorkshire Ln		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Lisle IL	Zip Code 60532	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	00002	Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25585 Date of Disbursement
	Mailing Address 2670 Yorkshire Ln		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Lisle IL	Zip Code 60532	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Kuhaneck David	Name	Transaction ID: 4B10317.E25586 Date of Disbursement
	Mailing Address 137 Iris Rd.		10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Darien IL	Zip Code 60561	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N	Name	Transaction ID: 4B10317.E25587 Date of Disbursement
	Mailing Address 2110 Babst Court		10
	City State Lisle IL	Zip Code 60532	Amount of Each Disbursement this Period 20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

Mailing Address   2110 Babst Court   1 0	,					
Transaction ID: 4810317.E25588  Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee in solicit contributions from such contribu		` ,	Use se	eparate schedule(s)		PAGE 471 / 534
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)    Illinois Republican Parry	I	TEMIZED DISBURSEMENTS				
An	(	OF LEVIN FUNDS	Aggre	gallori age	<del>                                   </del>	
Illinois Republican Party						
A. Laz David  Mailing Address 2110 Babst Court  City State Zip Code Listle IL 60532  Purpose of Disbursement IIL 60532  B. Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Aurora IL 60504  Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E25590  Date of Disbursement Interpretation Name  D. Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E25591  Date of Disbursement Memo: Generic Gotv Incent Gift Card  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E25591  Date of Disbursement Memo: Generic Gotv Incent Gift Card  Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Aurora IL 60504  Aurora IL 60		` '				
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Lisle IL 60532 20,00 Purpose of Disbursement Memo: Generic Goty Incent Glit Card  B. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504 20,00 Purpose of Disbursement Memo: Generic Goty Incent Glit Card  C. Full Name (Last, First, Middle Initial) / Full Organization Name Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504 20,00  Purpose of Disbursement Memo: Generic Goty Incent Glit Card  City State Zip Code Aurora IL 60504 20,00  Purpose of Disbursement Itis Period 20,00		Mailing Address 2110 Babst Court			10 7 31	<sup>Y</sup> 2010 <sup>Y</sup>
Purpose of Disbursement Memo: Generic Gotor Incent Girt Card  B. Mann Sarah Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Mann Sarah Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  City State Zip Code Aurora IL 60504  Arosa IL 60504  Purpose of Disbursement Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Aurora IL 60504  Arosa IL 60504  Purpose of Disbursement Memo: Generic Gotor Incent Girt Card  Transaction ID: 4B10317.E25590 Date of Disbursement Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement this Period Aurora IL 60504  Purpose of Disbursement Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Mann Sarah Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement this Period Aurora IL 60504  Purpose of Disbursement Gotor Incent Girt Card  Amount of Each Disbursement Memo: Generic Gotor Incent Girt Card  Amount of Each Disbursement Memo: Generic Gotor Incent Girt Card		City State	Zip	Code	Amount of Each Disbu	ursement this Period
Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Mann Sarah Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora ItL 60504  Purpose of Disbursement Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora ItL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Aurora ItL 60504  Purpose of Disbursement Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora ItL 60504  Purpose of Disbursement Ithis Period Aurora ItL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E25590 Date of Disbursement Ithis Period Aurora ItL 60504  Purpose of Disbursement Ithis Period Aurora ItL			605	532		20.00
B. Full Name (Last, First, Middle Initial) / Full Organization Name  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement  Mailing Address 905 Fieldside Initial) / Full Organization Name  C. Full Name (Last, First, Middle Initial) / Full Organization Name  C. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Amount of Each Disbursement this Period  Date of Disbursement  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period  20.00  Aurora IL 60504  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Amount of Each Disbursement this Period  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name  E. Full Name (Last, First, Middle Initial) / Full Organization Name  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period  Purpose of Disbursement  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period  D. City State Zip Code Amount of Each Disbursement this Period  Purpose of Disbursement  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  Amount of Each Disbursement this Period  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]						
B. Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  C. Full Name (Last, First, Middle Initial) / Full Organization Name  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  E. Full Name (Last, First, Middle Initial) / Full Organization Name  E. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Mann Sarah  Mailing Address 905 Fieldside Ln.  City Aurora IL 60504  Purpose of Disbursement  Mann Sarah  Mailing Address 905 Fieldside Ln.  City Aurora IL 60504  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25592  Date of Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]  Account: LEVIN [MEMO ITEM]	_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
City State Zip Code Aurora IIL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  CIty State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IIL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Aurora IIL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  D. Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IIL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Mann Sarah  Mailing Address 905 Fieldside Ln.  E. Full Name (Last, First, Middle Initial) / Full Organization Name Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period Disbursement  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period Disbursement  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period Disbursement  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period Disbursement  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Amount of Each Disbursement this Period Disbursement  Mann Sarah	В.		lame			
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C. Full Name (Last, First, Middle Initial) / Full Organization Name  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Full Name (Last, First, Middle Initial) / Full Organization Name  Mailing Address 905 Fieldside Ln.  Full Name (Last, First, Middle Initial) / Full Organization Name Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement IL 60504  Aurora IL 60504  Purpose of Disbursement IL 60504  City State Zip Code Aurora IL 60504  Purpose of Disbursement IL Full Name (Last, First, Middle Initial) / Full Organization Name Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora II II 60504  Account: LEVIN IMEMO ITEM]  Transaction ID: 4B10317.E25592 Date of Disbursement III III III III III III III III III I						
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Purpose of Disbursement Memo: Generic Gotv Incent Gift Card    Memo: Generic Gotv Incent Gift Card   Memo: G		City State	Zip	Code	Amount of Each Disbu	ursement this Period
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Memo: Generic Gotv Incent Gift Card  [MEMO ITEM]  Full Name (Last, First, Middle Initial) / Full Organization Name  Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  Account: LEVIN  [MEMO ITEM]  Transaction ID: 4B10317.E25592  Date of Disbursement  Amount of Each Disbursement this Period  Account: LEVIN  [MEMO ITEM]		Aurora IL	605	504		20.00
E. Mann Sarah  Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		·				
Mailing Address 905 Fieldside Ln.  City State Zip Code Aurora IL 60504  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]	Е.		lame			
Aurora IL 60504 20.00  Purpose of Disbursement Account: LEVIN [MEMO ITEM]						<sup>Y</sup> 2010 <sup>Y</sup>
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Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN [MEMO ITEM]		•	-		, or East Blobe	
Memo: Generic Gotv Incent Gift Card [MEMO ITEM]				· <del>· ·</del>	Account: LEVIN	20.00
		·				
	r	SUBTOTAL of Disbursements This Page (optional)			<b>•</b>	0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 472 / 534
	TEMIZED DISBURSEMENTS OF LEVIN FUNDS		for each category of the Aggregation Page	(check only one)  4a 4c x 5
_	Any Information copied from such Reports and Statem	ents ma	y not be sold or used by any pe	erson for the purpose of soliciting contributions
	r for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiz Mann Sarah	ation Na	ame	Transaction ID: 4B10317.E25593 Date of Disbursement
	Mailing Address 905 Fieldside Ln.			10 M / D D / Y Y Y Y Y
	,	State	Zip Code	Amount of Each Disbursement this Period
	-	IL	60504	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Moustos Danny	ation Na	ame	Transaction ID: 4B10317.E25594 Date of Disbursement
	Mailing Address 548 73rd Street, Apt. 103			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	IL	60516	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Moustos Danny	ation Na	ame	Transaction ID: 4B10317.E25595 Date of Disbursement
	Mailing Address 548 73rd Street, Apt. 103			10
	City	State	Zip Code	Amount of Each Disbursement this Period
		IL	60516	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Murphy Sarah	ation Na	ame	<b>Transaction ID:</b> 4B10317.E25596 Date of Disbursement
	Mailing Address 409 Robin Hill Ct.			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	-1	IL	60540	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organiz Philip Binu	ation Na	ame	Transaction ID: 4B10317.E25597 Date of Disbursement
	Mailing Address 2303 Sisters Ave.			10
	•	State IL	Zip Code 60564	Amount of Each Disbursement this Period
	Purpose of Disbursement	IL	00304	20.00
<b>-</b>	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 473 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5
	ny Information copied from such Reports and Statem r for commercial purposes, other than using the name			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiz Philip Binu	ation Na	me	Transaction ID: 4B10317.E25598 Date of Disbursement
	Mailing Address 2303 Sisters Ave.			10 M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Naperville	IL	60564	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Schneider Cindy	ation Na	me	Transaction ID: 4B10317.E25599 Date of Disbursement
	Mailing Address 912 Williamsburg Dr.			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Naperville	IL	60540	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Schneider Cindy	ation Na	me	Transaction ID: 4B10317.E25600 Date of Disbursement
	Mailing Address 912 Williamsburg Dr.			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	- 10 p 0 1 1 0	IL	60540	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Tucci Alan	ation Na	me	Transaction ID: 4B10317.E25601 Date of Disbursement
	Mailing Address 2416 Litchfield Ct.			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
		IL	60565	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Vanchiei Joe	ation Na	me	Transaction ID: 4B10317.E25602 Date of Disbursement
	Mailing Address 8717 Royal Swan Lane			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code 60561	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		00001	
_	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional) .			0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 474 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a 4c x 5
	OF LEVIN FUNDS	Aggregation rage	4b 4d 4d
	ny Information copied from such Reports and Statements m r for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Wehr Lisa	lame	Transaction ID: 4B10317.E25603 Date of Disbursement
	Mailing Address 1302 Sumner Street		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Wheaton IL	60189	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Zanfardino Jackie	lame	Transaction ID: 4B10317.E25604 Date of Disbursement
	Mailing Address 1390 Lilac Ln.		1 0 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Addison IL	60101	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Zanfardino Jackie	lame	Transaction ID: 4B10317.E25605 Date of Disbursement
	Mailing Address 1390 Lilac Ln.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Addison IL	60101	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25610 Date of Disbursement
	Mailing Address 609 S. Fell Apt 19		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25611 Date of Disbursement
E.	Vankampen Meredith		M M / D D / Y Y Y Y
	Mailing Address 609 S. Fell Apt 19		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 475 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
(	OF LEVIN FUNDS		Aggregation age	4b 4d 5
	ny Information copied from such Reports and Statem r for commercial purposes, other than using the name			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiz Vankampen Meredith	ation Na	me	Transaction ID: 4B10317.E25619 Date of Disbursement
	Mailing Address 609 S. Fell Apt 19			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
		IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiz Vankampen Meredith	ation Na	me	Transaction ID: 4B10317.E25913 Date of Disbursement
	Mailing Address 609 S. Fell Apt 19			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Normal	IL	61761	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Vankampen Meredith	ation Na	me	Transaction ID: 4B10317.E25914 Date of Disbursement
	Mailing Address 609 S. Fell Apt 19			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Normal	IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Vankampen Meredith	ation Na	me	Transaction ID: 4B10317.E26254 Date of Disbursement
	Mailing Address 609 S. Fell Apt 19			111 D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Normal	IL	61761	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Vankampen Meredith	ation Na	me	Transaction ID: 4B10317.E26255 Date of Disbursement
	Mailing Address 609 S. Fell Apt 19			111
	City	State	Zip Code	Amount of Each Disbursement this Period
	•	IL	61761	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional) .			0.00

و				
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 476 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statem r for commercial purposes, other than using the name			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiz Mickelson Melissa	ation Na	ame	Transaction ID: 4B10317.E25612 Date of Disbursement
	Mailing Address 609 E. Fell Apt 19			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State IL	Zip Code 61761	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>—</b> В.	Full Name (Last, First, Middle Initial) / Full Organiz Mickelson Melissa	ation Na	ame	Transaction ID: 4B10317.E25613 Date of Disbursement
	Mailing Address 609 E. Fell Apt 19			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State IL	Zip Code 61761	Amount of Each Disbursement this Period
	Purpose of Disbursement	IL	01/01	20.00
_	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organiz Kubik David	ation Na	ame	Transaction ID: 4B10317.E25614 Date of Disbursement
	Mailing Address 138 E. Beaufort Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code	Amount of Each Disbursement this Period
		IL	61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiz Morris Jordan	ation Na	ame	Transaction ID: 4B10317.E25617 Date of Disbursement
	Mailing Address 701 N Fell St			10 M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
		IL	61761	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiz Morris Jordan	ation Na	ame	Transaction ID: 4B10317.E25621 Date of Disbursement
	Mailing Address 701 N Fell St			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Normal	IL	61761	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional) .			0.00

9	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 477 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c   x   5 4b   4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Mickelson Melissa	Nam	e	Transaction ID: 4B10317.E26250 Date of Disbursement
	Mailing Address 609 S. Fell			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Normal IL		Zip Code 61761	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Mickelson Melissa	Nam	е	Transaction ID: 4B10317.E26251 Date of Disbursement
	Mailing Address 609 S. Fell			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Mickelson Melissa	Nam	е	Transaction ID: 4B10317.E25620 Date of Disbursement
	Mailing Address 609 S. Fell			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Mickelson Melissa	Nam	е	Transaction ID: 4B10317.E25915 Date of Disbursement
	Mailing Address 609 S. Fell			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Normal IL		Zip Code 61761	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		01701	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Mickelson Melissa	Nam	е	Transaction ID: 4B10317.E25916 Date of Disbursement
	Mailing Address 609 S. Fell			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 478 / 534
	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
		Aggregation Page	4a 4c 5
_	OF LEVIN FUNDS		4b 4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		
K	NAME OF COMMITTEE (In Full)	areas ar arry pointions committee	
	Illinois Republican Party		
L	/ Illinois republican raity		
	Full Name (Last, First, Middle Initial) / Full Organization Na	ime	Transaction ID: 4B10317.E25906
Α.	Limon Nick		Date of Disbursement
	Mailing Address 3089 Wildhorse St		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Normal IL	61761	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	Full Name (Last First Middle Initial) / Full Organization Na		Transaction ID: 4B10317.E25622
В.	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Date of Disbursement
	Limon Nick		M M / D D / Y Y Y Y
	Mailing Address 3089 Wildhorse St		10
	City	7in Codo	Amount of Each Disbursement this Period
	City State Normal IL	Zip Code 61761	
		01701	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
_	Memo: Generic Goty Incent Girt Gard		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25651
C.	Heffner Lauraleigh		Date of Disbursement
	Mailing Address 901 Colllege Court		10 31 Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Urbana IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25652
D.	Heffner Lauraleigh		Date of Disbursement
			10 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 901 Colllege Court		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Urbana IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-			-
E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25950 Date of Disbursement
	Heffner Lauraleigh		
	Mailing Address 901 Colllege Court		11 01 2010
	011	7: 0 1	Amount of Each Dishurasment this Beried
	City State	Zip Code	Amount of Each Disbursement this Period
	Urbana IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
-	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00
			3.30

lmaç	je# 11990327174		
	CHEDULE L-B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 479 / 534 (check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Heffner Lauraleigh	ame	Transaction ID: 4B10317.E25951 Date of Disbursement
	Mailing Address 901 Colllege Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Urbana IL	Zip Code 61801	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Heffner Lauraleigh	ame	Transaction ID: 4B10317.E26280 Date of Disbursement
	Mailing Address 901 Colllege Court		111 02 7 2010
	City State Urbana IL	Zip Code 61801	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Heffner Lauraleigh	ame	Transaction ID: 4B10317.E26281 Date of Disbursement
	Mailing Address 901 Colllege Court		111 D D / Y Y Y Y Y
	City State Urbana IL	Zip Code 61801	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Baker Matt	ame	Transaction ID: 4B10317.E26292 Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		M M / D D / Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	01020	Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization Na Baker Matt	ame	Transaction ID: 4B10317.E26293 Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
<b>—</b>	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
{	SUBTOTAL of Disbursements This Page (optional)		0.00

0.00

S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 480 / 534
	EMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
_	F LEVIN FUNDS  by Information copied from such Reports and Statements ma	v not be sold or used by any per	4b 4d
	for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Baker Matt	ame	Transaction ID: 4B10317.E26294 Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		11 M M / D D / Y Y Y Y Y
	City State Champaign IL	Zip Code	Amount of Each Disbursement this Period
	Champaign IL  Purpose of Disbursement	61820	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Baker Matt	ame	Transaction ID: 4B10317.E25664 Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	01020	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Baker Matt	ame	Transaction ID: 4B10317.E25962 Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		111 01 7 2010
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period
	Champaign IL  Purpose of Disbursement	01020	Account:   FVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Baker Matt	ame	Transaction ID: 4B10317.E25963 Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		1 1 D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
— E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25964 Date of Disbursement
	Baker Matt  Mailing Address 1007 South Locust, Apt#310		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN
<u> </u>			[MEMO ITEM]
L	UBTOTAL of Disbursements This Page (optional)		0.00
Т	OTAL This Period (last page this line number only)		<b>•</b>

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 481 / 534
IT	EMIZED DISBURSEMENTS	for each category of the	(check only one)
		Aggregation Page	4a 4c x 5
_	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad-		
$\setminus$	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na	ıme	Transaction ID: 4B10317.E25965
Α.	Baker Matt		
	Mailing Address 1007 South Locust, Apt#310		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
<b>—</b> В.	Full Name (Last, First, Middle Initial) / Full Organization Na Baker Matt	nme	Transaction ID: 4B10317.E25661 Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		10 31 / 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25662
C.	Baker Matt	unc	Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		10  31
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ime	Transaction ID: 4B10317.E25663
D.	Baker Matt		Date of Disbursement
	Mailing Address 1007 South Locust, Apt#310		10 M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]	
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ime	Transaction ID: 4B10317.E25974
E.	Kowalcyyk Rachel		Date of Disbursement
	Mailing Address 508 East Chalmers		1 1 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	60182	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Γ,	SUBTOTAL of Disbursements This Page (optional)		
1,	THIS FAYE (Upliblia)		0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 482 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
(	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
Α	ny Information copied from such Reports and Stater r for commercial purposes, other than using the name			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organi Kowalcyyk Rachel	ization Na	me	Transaction ID: 4B10317.E25975 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 508 East Chalmers			11 01 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Kowalcyyk Rachel	ization Na	me	Transaction ID: 4B10317.E25976 Date of Disbursement
	Mailing Address 508 East Chalmers			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organi Kowalcyyk Rachel	ization Na	me	Transaction ID: 4B10317.E25977 Date of Disbursement
	Mailing Address 508 East Chalmers			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi Kowalcyyk Rachel	ization Na	ime	Transaction ID: 4B10317.E26301 Date of Disbursement
	Mailing Address 508 East Chalmers			111 D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organi	ization Na	me	Transaction ID: 4B10317.E26302 Date of Disbursement
	Kowalcyyk Rachel  Mailing Address 508 East Chalmers			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Champaign	State IL	Zip Code	Amount of Each Disbursement this Period
	Champaign  Rurross of Disbursoment	IL	60182	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 483 / 534 (check only one)
I.	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX   5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Staten r for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organi. Kowalcyyk Rachel	zation Na	me	Transaction ID: 4B10317.E26303 Date of Disbursement
	Mailing Address 508 East Chalmers			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi. Kowalcyyk Rachel	zation Na	me	Transaction ID: 4B10317.E25995 Date of Disbursement
	Mailing Address 508 East Chalmers			1 1
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organi. Kowalcyyk Rachel	zation Na	me	Transaction ID: 4B10317.E25996 Date of Disbursement
	Mailing Address 508 East Chalmers			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi Kowalcyyk Rachel	zation Na	ime	Transaction ID: 4B10317.E25997 Date of Disbursement
	Mailing Address 508 East Chalmers			111 D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organi.	zation Na	me	Transaction ID: 4B10317.E25998 Date of Disbursement
	Mailing Address 508 East Chalmers			11  O 1  Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	60182	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

_	OUEDINE L. D./FEO.Farms (N)	_		
5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 484 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statemer r for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Kowalcyyk Rachel Mailing Address 508 East Chalmers	ion Nan	ne	Transaction ID: 4B10317.E25672 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City St Champaign IL Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	ate	Zip Code 60182	Amount of Each Disbursement this Period 20.00  Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizat	ion Nan	ne	Transaction ID: 4B10317.E25673 Date of Disbursement
	Mailing Address 508 East Chalmers			10 d d d d d d d d d d d d d d d d d d d
	City St	ate	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	•	60182	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organizat	ion Nan	ne	<b>Transaction ID:</b> 4B10317.E25674
C.	Kowalcyyk Rachel			Date of Disbursement
	Mailing Address 508 East Chalmers			10 M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City St	ate	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60182	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Kowalcyyk Rachel	ion Nam	ne	Transaction ID: 4B10317.E25675 Date of Disbursement
	Mailing Address 508 East Chalmers			10 M / D D / Y Y Y Y Y Y
	City St Champaign IL	ate	Zip Code 60182	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>Е</b> .	Full Name (Last, First, Middle Initial) / Full Organizat Riggs Collin	ion Nan	ne	Transaction ID: 4B10317.E25676 Date of Disbursement
	Mailing Address 713 West Ohio Street			10 31 / Y Y Y Y
	City St Urbana IL	ate	Zip Code 61801	Amount of Each Disbursement this Period 20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

_	COUEDING L. D. (EEO Forms OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 485 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
(	OF LEVIN FUNDS		Aggregation rage	4b 4d 5
	ny Information copied from such Reports and State r for commercial purposes, other than using the nar			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Orgar Riggs Collin	nization Na	me	Transaction ID: 4B10317.E25677 Date of Disbursement
	Mailing Address 713 West Ohio Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Urbana	IL	61801	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Orgar Riggs Collin	nization Na	me	Transaction ID: 4B10317.E26304 Date of Disbursement
	Mailing Address 713 West Ohio Street			111 D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Urbana	IL	61801	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organ Riggs Collin	nization Na	me	Transaction ID: 4B10317.E26305 Date of Disbursement
	Mailing Address 713 West Ohio Street			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Urbana	IL	61801	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Orgar Riggs Collin	nization Na	me	Transaction ID: 4B10317.E26306 Date of Disbursement
	Mailing Address 713 West Ohio Street			111 D D / Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Urbana	IL	61801	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last First Middle Initial) / Full Organ	sization No		Transaction ID: 4B10317.E25978
E.	Full Name (Last, First, Middle Initial) / Full Orgar Riggs Collin	iizalion iva	me	Date of Disbursement
	Mailing Address 713 West Ohio Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Urbana	IL	61801	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional	)		0.00

S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 486 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS	Aggregation Page	4a   4c   x   5
	ny Information copied from such Reports and Statements mar for commercial purposes, other than using the name and ac		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Riggs Collin	ame	Transaction ID: 4B10317.E25979 Date of Disbursement
	Mailing Address 713 West Ohio Street		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Urbana IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Riggs Collin	ame	Transaction ID: 4B10317.E25980 Date of Disbursement
	Mailing Address 713 West Ohio Street		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Urbana IL	61801	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Fair Adrienne	ame	Transaction ID: 4B10317.E25981 Date of Disbursement
	Mailing Address 604 East Armory Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Fair Adrienne	ame	Transaction ID: 4B10317.E25982 Date of Disbursement
	Mailing Address 604 East Armory Ave		1 1 M M / D D / Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N Fair Adrienne	ame	Transaction ID: 4B10317.E26307 Date of Disbursement
	Mailing Address 604 East Armory Ave		11
	City State Champaign IL	Zip Code	Amount of Each Disbursement this Period
	13	61820	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
F			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 487/534
17	EMIZED DISBURSEMENTS	for each category of the Aggregation Page	(check only one)  4a 4c X 5
_	OF LEVIN FUNDS		4b 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Fair Adrienne	ame	Transaction ID: 4B10317.E26308 Date of Disbursement
	Mailing Address 604 East Armory Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Fair Adrienne	ame	Transaction ID: 4B10317.E25678 Date of Disbursement
	Mailing Address 604 East Armory Ave	10  31	
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	01020	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization N E Sichao	ame	Transaction ID: 4B10317.E25679 Date of Disbursement
	Mailing Address 206 East Peabody Drive		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N E Sichao	ame	Transaction ID: 4B10317.E26309 Date of Disbursement
	Mailing Address 206 East Peabody Drive	M M / D D / Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N E Sichao	ame	Transaction ID: 4B10317.E26310 Date of Disbursement
	Mailing Address 206 East Peabody Drive		111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Ţ	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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S	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 488 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 1x 5
	any Information copied from such Reports and Statements may refor commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization NE Sichao	Name	Transaction ID: 4B10317.E25984 Date of Disbursement
	Mailing Address 206 East Peabody Drive		M M / D D / Y Y Y Y Y Y
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N E Sichao	Name	Transaction ID: 4B10317.E25983 Date of Disbursement
	Mailing Address 206 East Peabody Drive	1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Hua Yanxin	Name	Transaction ID: 4B10317.E25985 Date of Disbursement
	Mailing Address 206 East Peabody Drive	M M / D D / Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Hua Yanxin	Name	Transaction ID: 4B10317.E25986 Date of Disbursement
	Mailing Address 206 East Peabody Drive		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL  Purpose of Disbursement	61820	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N Hua Yanxin	Name	Transaction ID: 4B10317.E26311 Date of Disbursement
	Mailing Address 206 East Peabody Drive		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
<b>-</b>	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		▶ 0.00

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,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER:	PAGE 489 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)	4c 🗓 5
(	OF LEVIN FUNDS	Aggregation Page		4c
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Hua Yanxin	ame	Transaction ID: 4B1 Date of Disbursemen	nt
	Mailing Address 206 East Peabody Drive		1 1 D D D D D D D D D D D D D D D D D D	Y 2010 Y
	City State	Zip Code	Amount of Each Disb	oursement this Period
	Champaign IL	61820		20.00
	Purpose of Disbursement		Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Hua Yanxin	ame	Transaction ID: 4B1 Date of Disbursemen	0317.E25680 It
	Mailing Address 206 East Peabody Drive		10 7 31	2010
	City State	Zip Code	Amount of Each Disk	oursement this Period
	Champaign IL	61820		20.00
	Purpose of Disbursement		Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Xuan Danjie	ame	Transaction ID: 4B1 Date of Disbursemen	nt
	Mailing Address 1005 West Gregory Drive		10 7 3 1	Y 2010
	City State	Zip Code	Amount of Each Disb	oursement this Period
	Urbana IL	61801		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Xuan Danjie	ame	Transaction ID: 4B1 Date of Disbursemen	
	Mailing Address 1005 West Gregory Drive		10	Y 2010
	City State	Zip Code	Amount of Each Disk	oursement this Period
	Urbana IL	61801		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]	
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B1	0317.E25999
E.	Xuan Danjie		Date of Disbursemen	ıt
	Mailing Address 1005 West Gregory Drive		M M / D D D O 1	2010
	City State Urbana IL	Zip Code 61801	Amount of Each Disb	oursement this Period 20.00
	Purpose of Disbursement	01001	Account 15\UNI	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]	
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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 490 / 534
П	EMIZED DISBURSEMENTS	for each category of the	(check only one)
c	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements n	nay not be sold or used by any per	4b     4d   son for the purpose of soliciting contributions
	for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Xuan Danjie	Name	Transaction ID: 4B10317.E26319 Date of Disbursement
	Mailing Address 1005 West Gregory Drive	1 1 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period
	<u>Urbana</u> IL	61801	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E26320
В.	Xuan Danjie		Date of Disbursement
	Mailing Address 1005 West Gregory Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Urbana IL	61801	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	Account: LEVIN	
_	Wello. Geliene Goty incent Gilt Gald		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Stephany Margaret Mary	Name	Transaction ID: 4B10317.E26324 Date of Disbursement
	Mailing Address 508 East Chalmers		1 1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	60305	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E26325 Date of Disbursement
	Stephany Margaret Mary  Mailing Address 508 East Chalmers		1 1 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Maining Address 500 East Offamers		77 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	60305	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Stephany Margaret Mary	Name	<b>Transaction ID:</b> 4B10317.E25688 Date of Disbursement
	Mailing Address 508 East Chalmers	10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	60305	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Γ,	CURTOTAL of Dichurcoments This Dogs (antional)		
	SUBTOTAL of Disbursements This Page (optional)		0.00
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0	CHEDITIET B (EEC Form 2V)	Г		
	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 491 / 534 (check only one)
П	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
C	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX   5
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name an			
$\vdash$	NAME OF COMMITTEE (In Full)			
	Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizatio	n Nan	ne	Transaction ID: 4B10317.E26003 Date of Disbursement
	Stephany Margaret Mary			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 508 East Chalmers			
	City Stat	е	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60305	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizatio Stephany Margaret Mary	n Nan	ne	Transaction ID: 4B10317.E26004 Date of Disbursement
	Mailing Address 508 East Chalmers			1 1 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Walling Address Soo Last Orlainters			2010
	City Stat	е	Zip Code	Amount of Each Disbursement this Period
	Champaign IL		60305	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organizatio	n Nan	ne	Transaction ID: 4B10317.E26005 Date of Disbursement
	Sackett Maisie			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 712 Essec Court			11 01 2010
	City Stat	е	Zip Code	Amount of Each Disbursement this Period
	Glen Ellyn IL		60137	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organizatio	n Nan	ne	<b>Transaction ID: </b> 4B10317.E25689
D.	Sackett Maisie			Date of Disbursement
	Mailing Address 712 Essec Court			10 M / 31 / Y Y Y Y Y
	City Stat	е	Zip Code	Amount of Each Disbursement this Period
	Glen Ellyn IL		60137	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organizatio	n Nan	ne	Transaction ID: 4B10317.E25690
E.	Sackett Maisie			Date of Disbursement
	Mailing Address 712 Essec Court			10
	City Stat	е	Zip Code	Amount of Each Disbursement this Period
	Glen Ellyn IL		60137	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Ţ.	SUBTOTAL of Disbursements This Page (optional)			0.00
- 1 `				0.00

C	CHEDITIE I B (FFC Form 2V)		
	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 492 / 534 (check only one)
П	TEMIZED DISBURSEMENTS	for each category of the	
C	OF LEVIN FUNDS	Aggregation Page	4a 4c LX 5
	ny Information copied from such Reports and Statements nor for commercial purposes, other than using the name and a		erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)		
Z	Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization   Sackett Maisie	Name	Transaction ID: 4B10317.E26326 Date of Disbursement
	Mailing Address 712 Essec Court		111 D D V Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Glen Ellyn IL	60137	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization   Sackett Maisie	Name	Transaction ID: 4B10317.E26327 Date of Disbursement
	Mailing Address 712 Essec Court		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	, 12 2000 Court		02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Glen Ellyn IL	60137	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Denton Brad	Name	<b>Transaction ID:</b> 4B10317.E25744 Date of Disbursement
	Mailing Address 1202 W. Fillmore		10 M / D D V Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25745
D.	Denton Brad		Date of Disbursement
	Mailing Address 1202 W. Fillmore		10 M / D D / Y 2010 Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization	Name	Transaction ID: 4B10317.E25746
E.	Denton Kim		Date of Disbursement
	Mailing Address Rr3 Box 543		10
	City State	Zip Code	Amount of Each Disbursement this Period
	Vandalia IL	62471	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
٦	SUBTOTAL of Disbursements This Page (optional)		0.00
ા `			0.00

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П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 493 / 534 (check only one)
C	OF LEVIN FUNDS	/ taggrogation i ago	4b 4d
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Denton Kim	ame	Transaction ID: 4B10317.E25747 Date of Disbursement
	Mailing Address Rr3 Box 543		10 M / 31 / Y Y Y Y Y Y
	City State Vandalia IL	Zip Code 62471	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Davenport Judy	ame	Transaction ID: 4B10317.E25748 Date of Disbursement
	Mailing Address 703 Fourth Street	10 31 / 2010	
	City State Highland IL	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	<u> </u>	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Davenport Judy	ame	Transaction ID: 4B10317.E25749 Date of Disbursement
	Mailing Address 703 Fourth Street		10 M / D D / Y Y Y Y Y Y
	City State Highland IL	Zip Code 62249	Amount of Each Disbursement this Period
	Highland IL Purpose of Disbursement	02249	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Davenport Judy	ame	Transaction ID: 4B10317.E25750 Date of Disbursement
	Mailing Address 703 Fourth Street		10 M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Highland IL	62249	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26097 Date of Disbursement
	Davenport Judy  Mailing Address 703 Fourth Street		11
	City State	Zip Code	Amount of Each Disbursement this Period
	Highland IL	62249	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
٦	SUBTOTAL of Disbursements This Page (optional)		<b>▶</b> 0.00

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	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 494 / 534 (check only one)
П	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a 4c x 5
C	OF LEVIN FUNDS	Aggregation age	4b 4d 5
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Vanhoose Tonda	ame	Transaction ID: 4B10317.E26082 Date of Disbursement
	Mailing Address 1616 Gretchen		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Belleville IL	62226	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Vanhoose Tonda	ame	Transaction ID: 4B10317.E26083 Date of Disbursement
	Mailing Address 1616 Gretchen		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Belleville IL	62226	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization N Vanhoose Tonda	ame	Transaction ID: 4B10317.E25751 Date of Disbursement
	Mailing Address 1616 Gretchen		10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Belleville IL	62226	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25752 Date of Disbursement
	Vanhoose Tonda		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 1616 Gretchen		10 31 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Belleville IL	62226	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E25753
E.	Heslop Hope		Date of Disbursement
	Mailing Address 125 E. Fairway Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Belleville IL	Zip Code 62223	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	ULLLU	
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 495 / 534
IT	EMIZED DISBURSEMENTS		for each category of the	(check only one)
	F LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizatio Gundlach Dan	n Name	9	Transaction ID: 4B10317.E25759 Date of Disbursement
	Mailing Address 2918 Indiana Ave			10 M / 31 / Y Y Y Y Y
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Granite City IL		62040	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizatio Mcconville Kevin	n Name	9	Transaction ID: 4B10317.E25760 Date of Disbursement
	Mailing Address 60 Wren Drive			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Highland IL	е	Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card	[MEMO ITEM]		
C.	Full Name (Last, First, Middle Initial) / Full Organizatio Reis Jill	n Name	9	<b>Transaction ID:</b> 4B10317.E25767 Date of Disbursement
	Mailing Address 1610 Lind St			10 M A A A A A A A A A A A A A A A A A A
	City State	e	Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizatio Reis Jill	n Name	e	Transaction ID: 4B10317.E26105 Date of Disbursement
	Mailing Address 1610 Lind St			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	e	Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<u> —</u> Е.	Full Name (Last, First, Middle Initial) / Full Organizatio Farha Jr Micheal	n Name	9	Transaction ID: 4B10317.E25770 Date of Disbursement
	Mailing Address 302 W Adams			10
	City State	е	Zip Code	Amount of Each Disbursement this Period
	Macomb IL		61455	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
s	SUBTOTAL of Disbursements This Page (optional)			0.00
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	OTAL This Period (last page this line number only)			<b>&gt;</b>

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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 496 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation rage	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Farha Jr Micheal	Nam	е	Transaction ID: 4B10317.E25771 Date of Disbursement
	Mailing Address 302 W Adams			10 M / D D / Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Macomb IL		61455	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Coons Vicki	Nam	е	Transaction ID: 4B10317.E25772 Date of Disbursement
	Mailing Address 1308 S 22			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Coons Vicki	Nam	е	Transaction ID: 4B10317.E26400 Date of Disbursement
	Mailing Address 1308 S 22			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Coons Vicki	Nam	е	Transaction ID: 4B10317.E26108 Date of Disbursement
	Mailing Address 1308 S 22			1 1 M M / D D / Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Quincy IL		62301	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Mcelwee Perry	Nam	e	Transaction ID: 4B10317.E25773 Date of Disbursement
	Mailing Address 2392 N 1675th Pl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Camp Point IL		62320	20.00
	Purpose of Disbursement			Account: LEVIN
<u>_</u>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

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S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 497 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c X 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c Lx 5
	ny Information copied from such Reports and Stater r for commercial purposes, other than using the nan			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Mcelwee Lenore	ization Na	ame	Transaction ID: 4B10317.E25774 Date of Disbursement
	Mailing Address 2392 N 1675th PI			10 M / D D / Y Y Y Y Y Y
	City Camp Point	State IL	Zip Code 62320	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Cocke Justin	ization Na	ame	Transaction ID: 4B10317.E25784 Date of Disbursement
	Mailing Address 3414 State Hwy 148			10 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Mulkeytown	State IL	Zip Code 62865	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organ Grasso Robert	ization Na	ame	Transaction ID: 4B10317.E25815 Date of Disbursement
	Mailing Address 1965 Ravine			11 M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Gurnee	IL	60031	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Wittenberg Sharon	ization Na	ame	Transaction ID: 4B10317.E25831 Date of Disbursement
	Mailing Address 4163 West End Road			11 M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Downers Grove	IL	60515	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organ Gluek Katie	ization Na	ame	Transaction ID: 4B10317.E25838 Date of Disbursement
	Mailing Address 701 University Place			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Evanston	State	Zip Code 60201	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
<b>-</b>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 498 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a  4c  5
	OF LEVIN FUNDS		/ Aggregation rage	4b 4d 5
	ny Information copied from such Reports and State r for commercial purposes, other than using the nar			
$\setminus$	NAME OF COMMITTEE (In Full)			
	Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Orgar Gluek Katie	nization Na	me	Transaction ID: 4B10317.E25840 Date of Disbursement
	Mailing Address 701 University Place			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Evanston	IL	60201	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Gluek Katie	nization Na	me	Transaction ID: 4B10317.E25841 Date of Disbursement
	Mailing Address 701 University Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Evanston	IL	60201	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organ Gluek Katie	nization Na	me	Transaction ID: 4B10317.E25842 Date of Disbursement
	Mailing Address 701 University Place			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Evanston	IL	60201	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Gluek Katie	nization Na	me	Transaction ID: 4B10317.E26181 Date of Disbursement
	Mailing Address 701 University Place			111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Evanston	IL	60201	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organ Gluek Katie	nization Na	me	Transaction ID: 4B10317.E26182 Date of Disbursement
	Mailing Address 701 University Place			111 02 7 2010
	City	State	Zip Code	Amount of Each Disbursement this Period
	Evanston	IL	60201	20.00
	Purpose of Disbursement			Account: LEVIN
•	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional	)		0.00

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5	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 499 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
_	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statemer r for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Gluek Katie  Mailing Address 701 University Place	on Nam	ne	Transaction ID: 4B10317.E26183 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 701 Offiversity Frace			02 2010
	City Sta	ıte	Zip Code	Amount of Each Disbursement this Period
	Evanston IL		60201	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organizat Gore Elizabeth	on Nam	ne	Transaction ID: 4B10317.E26187 Date of Disbursement
	Mailing Address 1871 Orrington			111
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Evanston IL		60201	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organizat	on Nam	ne	Transaction ID: 4B10317.E26188
C.	Gore Elizabeth	on rear	.0	Date of Disbursement
	Mailing Address 1871 Orrington			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ıte	Zip Code	Amount of Each Disbursement this Period
	Evanston IL		60201	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Gore Elizabeth	on Nam	ne	Transaction ID: 4B10317.E26189 Date of Disbursement
	Mailing Address 1871 Orrington			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ate	Zip Code	Amount of Each Disbursement this Period
	Evanston IL		60201	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
<b>–</b> Е.	Full Name (Last, First, Middle Initial) / Full Organizat	on Nam	ne	Transaction ID: 4B10317.E25839 Date of Disbursement
	Gore Elizabeth			
	Mailing Address 1871 Orrington			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sta	ite	Zip Code	Amount of Each Disbursement this Period
	Evanston IL		60201	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)			0.00

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ξ	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 500 / 534	
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)	
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5	
1	any Information copied from such Reports and Statements marker for commercial purposes, other than using the name and a		rson for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Wein Dan	lame	Transaction ID: 4B10317.E25843 Date of Disbursement	
	Mailing Address 827 Kimballwood Ln		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period	1
	Highland Park IL	60035	20.00	
	Purpose of Disbursement		Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
В.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E26190 Date of Disbursement	
	Mailing Address 827 Kimballwood Ln		11 02 7 2010	
	City State	Zip Code	Amount of Each Disbursement this Period	_
	Highland Park IL	60035	20.00	
	Purpose of Disbursement		Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
c.	Full Name (Last, First, Middle Initial) / Full Organization N Wein Dan	lame	Transaction ID: 4B10317.E26191 Date of Disbursement	
	Mailing Address 827 Kimballwood Ln		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period	1
	Highland Park IL	60035	20.00	
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization N Wein Dan	lame	Transaction ID: 4B10317.E26192 Date of Disbursement	
	Mailing Address 827 Kimballwood Ln		11 M M / D D / Y Y Y Y Y Y Y	
	City State	Zip Code	Amount of Each Disbursement this Period	
	Highland Park IL	60035	20.00	
	Purpose of Disbursement		Account: LEVIN	
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
_	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E25844	
E.	Wein Dan		Date of Disbursement	
	Mailing Address 827 Kimballwood Ln		11	
	City State Highland Park IL	Zip Code 60035	Amount of Each Disbursement this Period 20.00	1
	Purpose of Disbursement		Account: LEVIN	1
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]	
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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 501 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5 4b 4d
	ny Information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Bakir Jamal Mailing Address 8202 Millstone	lame	Transaction ID: 4B10317.E25852 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Hills IL	Zip Code 60465	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Bakir Jamal	lame	Transaction ID: 4B10317.E25853 Date of Disbursement
	Mailing Address 8202 Millstone		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Hills IL	60465	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN
_			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Bakir Jamal	lame	Transaction ID: 4B10317.E25854 Date of Disbursement
	Mailing Address 8202 Millstone		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Hills IL	60465	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
 D.	Full Name (Last, First, Middle Initial) / Full Organization N Bakir Jamal	lame	Transaction ID: 4B10317.E25855 Date of Disbursement
	Mailing Address 8202 Millstone		111 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Hills IL	Zip Code 60465	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N Bakir Jamal	Jame	Transaction ID: 4B10317.E26195 Date of Disbursement
	Mailing Address 8202 Millstone		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Hills IL	Zip Code 60465	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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- [ '	SUBTOTAL of Disbursements This Page (optional)		0.00

	SCHEDULE L-B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 502 / 534 (check only one)
_(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5 4b 4d
	Any Information copied from such Reports and Statements magner for commercial purposes, other than using the name and add		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Bakir Jamal	me	Transaction ID: 4B10317.E26196 Date of Disbursement
	Mailing Address 8202 Millstone		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Hills IL	Zip Code 60465	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Miller Joe	me	Transaction ID: 4B10317.E25858 Date of Disbursement
	Mailing Address 19 Terberry		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Heights IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	60463	Account: LEVIN [MEMO ITEM]
<del>-</del> С.	Full Name (Last, First, Middle Initial) / Full Organization Na	me	Transaction ID: 4B10317.E25859 Date of Disbursement
Ο.	Miller Joe  Mailing Address 19 Terberry		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Heights IL  Purpose of Disbursement	60463	20.00
_	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Miller Joe	me	Transaction ID: 4B10317.E25860 Date of Disbursement
	Mailing Address 19 Terberry		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Palos Heights IL  Purpose of Disbursement	60463	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Na Miller Joe	me	Transaction ID: 4B10317.E25861 Date of Disbursement
	Mailing Address 19 Terberry		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Palos Heights IL	Zip Code 60463	Amount of Each Disbursement this Period 20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
ſ	SUBTOTAL of Disbursements This Page (optional)		0.00

_	NOUEDIUE L. D. (EEO Estres OV)	_		
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 503 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
	OF LEVIN FUNDS		Aggregation Fage	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Hogan Terry	Nam	e	Transaction ID: 4B10317.E25862 Date of Disbursement
	Mailing Address 14323 S. Kostner			11 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Midlothian IL		60445	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN
_	Memo: Generic Goty Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Hogan Terry	Nam	e	Transaction ID: 4B10317.E25863 Date of Disbursement
	Mailing Address 14323 S. Kostner			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Midlothian IL		60445	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Hogan Terry	Nam	е	Transaction ID: 4B10317.E25864 Date of Disbursement
	Mailing Address 14323 S. Kostner			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Midlothian IL		60445	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Hogan Terry	Nam	е	Transaction ID: 4B10317.E25865 Date of Disbursement
	Mailing Address 14323 S. Kostner			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Midlothian IL		60445	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
- Е.	Full Name (Last, First, Middle Initial) / Full Organization Heller Kayla	Nam	е	Transaction ID: 4B10317.E25874 Date of Disbursement
	Mailing Address 3600 W. 117th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Chicago IL		60655	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00

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(	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x15 4b 4d
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organi Heller Kayla	ization Na	ame	Transaction ID: 4B10317.E25875 Date of Disbursement
	Mailing Address 3600 W. 117th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State	Zip Code 60655	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organi Heller Kayla	ization Na	ame	Transaction ID: 4B10317.E25876 Date of Disbursement
	Mailing Address 3600 W. 117th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60655	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organi Filipello Lynda	ization Na	ame	Transaction ID: 4B10317.E25893 Date of Disbursement
	Mailing Address 4401 Fender			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Lisle	State	Zip Code 60532	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organi Filipello Lynda	ization Na	ame	Transaction ID: 4B10317.E26224 Date of Disbursement
	Mailing Address 4401 Fender			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Lisle Purpose of Disbursement	IL	60532	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organi Leventis Gus	ization Na	ame	Transaction ID: 4B10317.E25894 Date of Disbursement
	Mailing Address 18 S Vista			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Addison	IL	60101	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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	ny Information copied from such Reports and Statements for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Nelson Jody Mailing Address 2431 Carlton Dr.	Nam	9	Transaction ID: 4B10317.E25895 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2431 Cariton Dr.			11 01 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Woodridge		60517	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>—</b> В.	Full Name (Last, First, Middle Initial) / Full Organization Nelson Jody	Namo	9	Transaction ID: 4B10317.E25896 Date of Disbursement
	Mailing Address 2431 Carlton Dr.			M M / D D / Y Y Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1
	City State		Zip Code	Amount of Each Disbursement this Period
	Woodridge IL		60517	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization	Name	Э	Transaction ID: 4B10317.E25897 Date of Disbursement
C.	Nelson Jody			
	Mailing Address 2431 Carlton Dr.			11
	City State		Zip Code	Amount of Each Disbursement this Period
	Woodridge IL		60517	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Name	<del></del>	Transaction ID: 4B10317.E25898
D.	Nelson Jody			Date of Disbursement  M M / D D / Y Y Y Y
	Mailing Address 2431 Carlton Dr.			111 01 2010
	City State		Zip Code	Amount of Each Disbursement this Period
	Woodridge IL		60517	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name / Lock First Middle Initial) / Full Ourse institut	Name		Transaction ID: 4B10317.E25899
E.	Full Name (Last, First, Middle Initial) / Full Organization Nicola Jim	ivam	9	Date of Disbursement
	Mailing Address 613 72nd Court			11
	City State		Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Nicola Jim	n Nam	ne	Transaction ID: 4B10317.E25900 Date of Disbursement
	Mailing Address 613 72nd Court			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Downers Grove IL		60516	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Noble Ben	Nam	ne	Transaction ID: 4B10317.E25901 Date of Disbursement
	Mailing Address 442 N Stone Ave.			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Lagrange Park IL		60526	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
С.	Full Name (Last, First, Middle Initial) / Full Organization Noble Ben	Nam	ne	Transaction ID: 4B10317.E25902 Date of Disbursement
	Mailing Address 442 N Stone Ave.			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Lagrange Park IL		60526	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	Nam	ne	<b>Transaction ID:</b> 4B10317.E25903
D.	Wehr Chris		.•	Date of Disbursement
	Mailing Address 1302 Sumner Street			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Wheaton IL		60189	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
— Е.	Full Name (Last, First, Middle Initial) / Full Organization Watt David	Nam	ne	Transaction ID: 4B10317.E25904 Date of Disbursement
	Mailing Address 631 W. Orlando Apt 208			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	1	Zip Code	Amount of Each Disbursement this Period
	Normal IL	•	61761	20.00
	Purpose of Disbursement		31701	
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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ITEMIZED DISBURSEMENTS OF LEVIN FUNDS  OF LEVIN FUNDS  Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee  NAME OF COMMITTEE (In Full) Illinois Republican Party  Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Mailing Address 631 W. Orlando Apt 208  City State Zip Code Normal IL 61761  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Full Name (Last, First, Middle Initial) / Full Organization Name  Transaction ID: 4B10317.E26243	_	OUEDINE L. D./EEO Forms OV		
OF LEVIN FUNDS  Ary Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee or for commercial purposes. Arising the name and address of any political committee to solicit contributions from such committee or for commercial purposes. Arising the name and address of any political committee to solicit contributions from such committee.  A. A. Full Name (Last, First, Middle Initial) / Full Organization Name  A. City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  B. Full Name (Last, First, Middle Initial) / Full Organization Name  Matiling Address 631 W. Orlando Apt 208  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  Memo: Generic Got/ Incent Gill Card  Amount of Each Disbursement this Period 20.00  Account: LEVIN (MEMO ITEM)  Malling Address 631 W. Orlando Apt 208  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Full Name (Last, First, Middle Initial) / Full Organization Name  Sparks Michael  Malling Address 588 County Road 2175 E.  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  Sparks Michael  Malling Address 588 County Road 2175 E.  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  Sparks Michael  Malling Address 588 County Road 2175 E.  City State Zip Code Name (Last, First, Middle Initial) / Full Organization Name  Sparks Michael  Malling Address 588 County Road 2175 E.  City State Zip Code Name (Last, First, Mid	5	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (In Full)    NAME OF COMMITTEE (In Full)	П	FEMIZED DISBURSEMENTS		
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commencial purposes, ofter than using the name and address of any political committee to solicit contributions from such committee or for commencial purposes, ofter than using the name and address of any political committee to solicit contributions from such committee or for for commencial purposes. Part of the purpose of soliciting contributions from such committee or for for the purpose of soliciting contributions from such committee or solicit contributions from such committee or for for the purpose of soliciting contributions from such committee or solicit contributions from such contributions from such contributions from such committee or solicit contributions from such contri	(	OF LEVIN FUNDS	Aggregation Page	
Illinois Republican Party				rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Mailing Address 631 W. Orlando Apt 208  City State Zip Code Normal IL 61761  Purpose of Disbursement Memo: Generic Golv Incent Gift Card  Mailing Address 631 W. Orlando Apt 208  Transaction ID: 4B10317.E25905 Date of Disbursement this Period  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E26242  Account: LEVIN [MEMO ITEM]  B. Full Name (Last, First, Middle Initial) / Full Organization Name  Watt David  Mailing Address 631 W. Orlando Apt 208  City State Zip Code Normal IL 61761  Purpose of Disbursement Memo: Generic Golv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  C. Watt David  Mailing Address 631 W. Orlando Apt 208  City State Zip Code Normal IL 61761  Purpose of Disbursement Mailing Address 631 W. Orlando Apt 208  City State Zip Code Normal IL 61761  Purpose of Disbursement Memo: Generic Golv Incent Gift Card  Transaction ID: 4B10317.E26243  Date of Disbursement Initial / Full Organization Name  City State Zip Code Normal IL 61761  Purpose of Disbursement Gift Card  D. Sparks Michael  Mailing Address 588 County Road 2175 E.  City State Zip Code Normal IL 61771  Purpose of Disbursement Memo: Generic Golv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name Sparks Michael  Mailing Address 588 County Road 2175 E.  City State Zip Code Normal Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Sparks Michael  Mailing Address 588 County Road 2175 E.  City State Zip Code Name Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Sparks Michael  Mailing Address 588 County Road 2175 E.  City State Zip Code Name Gift Card  Account: LEVIN [MEMO ITEM]  Transaction ID: 4B10317.E25908  Date of Disbursement this Period Name Sparks Michael  Mailing Address 588 County Road 2175 E.  City State Zip Code Name Gift Card  Account: LEVIN [MEMO ITEM]		` '		
A. Watt David  Mailing Address 631 W. Orlando Apt 208  City State Zip Code ILL 61761  Purpose of Disbursement Girl Card  B. Watt David  Mailing Address 631 W. Orlando Apt 208  City State Zip Code ILL 61761  Purpose of Disbursement Girl Card  Mailing Address 631 W. Orlando Apt 208  City State Zip Code ILL 61761  Purpose of Disbursement Girl Card  City State Zip Code ILL 61761  Purpose of Disbursement ILL 61771  Purpose of Disbursemen	Z			
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Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Watt David  City State Zip Code Normal IL 61761  Purpose of Disbursement Mailing Address 631 W. Orlando Apt 208  City State Zip Code Normal IL 61761  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  City State Zip Code Watt David Mailing Address 631 W. Orlando Apt 208  City State Zip Code Normal IL 61761  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E26243 Date of Disbursement Incent Gift Card  Account: LEVIN IMEMO ITEM]  Transaction ID: 4B10317.E26243 Date of Disbursement Incent Gift Card  Account: LEVIN IMEMO ITEM]  Transaction ID: 4B10317.E26243 Date of Disbursement this Period  Account: LEVIN IMEMO ITEM]  Transaction ID: 4B10317.E25907 Date of Disbursement this Period  D. Sparks Michael Mailing Address 588 County Road 2175 E.  City State Zip Code Secor IL 61771  Account: LEVIN IMEMO ITEM]  E. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Sparks Michael Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name  D. Sparks Michael Memo: Generic Gotv Incent Gift Card  E. Full Name (Last, First, Middle Initial) / Full Organization Name  Sparks Michael Mailing Address 588 County Road 2175 E.  City State Zip Code Secor IL 61771  Account: LEVIN IMEMO ITEM]  Transaction ID: 4B10317.E25908 Date of Disbursement Memo: Generic Gotv Incent Gift Card  Account: LEVIN IMEMO ITEM]  Transaction ID: 4B10317.E25908 Date of Disbursement this Period Date of		Normal IL	61761	20.00
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Date of Disbursement    Mailing Address   588 County Road 2175 E.		·		
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 508 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a   4c Lx 5   4d   4d   4d   4d   4d   4d   4d
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and			rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Kubik David	Nan	ne	Transaction ID: 4B10317.E25909 Date of Disbursement
	Mailing Address 138 Beaufort			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Sikes Joel	Nan	ne	Transaction ID: 4B10317.E25910 Date of Disbursement
	Mailing Address 1204 N Madison			1 1 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Sikes Joel	Nan	ne	Transaction ID: 4B10317.E26256 Date of Disbursement
	Mailing Address 1204 N Madison			M M / D D / Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Normal IL		61761	20.00
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D.	Full Name (Last, First, Middle Initial) / Full Organization Mcknight Kerry	Nan	ne	Transaction ID: 4B10317.E25911 Date of Disbursement
	Mailing Address 1902 Berrywood Lane			1 1 M / D D / Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Bloomington IL		61704	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Lindgren Keith	Nan	ne	Transaction ID: 4B10317.E25912 Date of Disbursement
	Mailing Address 1302 Lincoln Road			11
	City State Marquette Heights IL		Zip Code 61554	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement		0.00.	Account: LEVIN
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 509 / 534 (check only one)
I.	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	
(	OF LEVIN FUNDS		Aggregation rage	4a   4c   LX 5   4d   4d   4d   4d   4d   4d   4d
	ny Information copied from such Reports and Statements r for commercial purposes, other than using the name and			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organization Kubik Dave	Nam	e	Transaction ID: 4B10317.E25920 Date of Disbursement
	Mailing Address 138 E. Beaufort St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
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	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN
_	Meno. Generic Goty Incent Girt Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Strubhar Randy	Nam	e	Transaction ID: 4B10317.E25923 Date of Disbursement
	Mailing Address 6328 N. 425th East Rd			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Mclean IL		61754	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Strubhar Linda	Nam	е	Transaction ID: 4B10317.E25924 Date of Disbursement
	Mailing Address 6328 N. 425th East Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Mclean IL		61754	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Kunde Drew	Nam	e	Transaction ID: 4B10317.E25925 Date of Disbursement
	Mailing Address 2008 Lake Bluff Rd			111
	City State		Zip Code	Amount of Each Disbursement this Period
	Bloomington IL		61704	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organization	Nam	e	Transaction ID: 4B10317.E25926 Date of Disbursement
	Kunde Drew  Mailing Address 2008 Lake Bluff Rd			11 01 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	011		7'- 0-1	Amount of Each Disbursement this Period
	City State Bloomington IL		Zip Code 61704	
	Purpose of Disbursement		01704	20.00
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	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:	PAGE 510/534
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	(check only one)	4c 🗓 5
(	OF LEVIN FUNDS		Aggregation Fage	4b	4c
	Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and				
	NAME OF COMMITTEE (In Full) Illinois Republican Party				
A.	Full Name (Last, First, Middle Initial) / Full Organization Kunde Drew	Nan	ne	Transaction ID: 4E Date of Disbursement	ent 
	Mailing Address 2008 Lake Bluff Rd			1 1 D D D D	2010
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	Bloomington IL		61704		20.00
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В.	Full Name (Last, First, Middle Initial) / Full Organization Kunde Drew	Nan	ne	Transaction ID: 4E Date of Disburseme	
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	Purpose of Disbursement			Account: LEVIN	
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) / Full Organization Berghouse Alex	Nan	ne	Transaction ID: 4E Date of Disbursement	ent
	Mailing Address 594 S. Small Ave			1 1 D D D	Y 2010
	City State		Zip Code	Amount of Each Dis	sbursement this Period
	Kankakee IL		60901		20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
D.	Full Name (Last, First, Middle Initial) / Full Organization Cross Michael	Nan	ne	Transaction ID: 4E Date of Disburseme	
	Mailing Address 218 Crossing Dr			1 1 M / D D D D D D D D D D D D D D D D D D	2010
	City State		Zip Code	Amount of Each Di	sbursement this Period
	Normal IL		61761		20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]	
Е.	Full Name (Last, First, Middle Initial) / Full Organization	Nan	ne	Transaction ID: 4E	
Ε.	Cross Michael			M M / D D	
	Mailing Address 218 Crossing Dr			11 02	2010
	City State Normal IL		Zip Code 61761	Amount of Each Dis	sbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN	
<b>—</b>	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]	
	SUBTOTAL of Disbursements This Page (optional)			<b>•</b>	0.00

_	COUEDING L. D. (EEO Form OV)		
	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 511 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	
	OF LEVIN FUNDS	Aggregation Page	4a 4c Lx 5
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Kelly Blair	ame	Transaction ID: 4B10317.E26247 Date of Disbursement
	Mailing Address 1018 N Maple Wood Ave		111 D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Peoria IL	61605	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Kelly Blair	ame	Transaction ID: 4B10317.E25929 Date of Disbursement
	Mailing Address 1018 N Maple Wood Ave		111
	City State	Zip Code	Amount of Each Disbursement this Period
	Peoria IL	61605	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Zenn James	ame	Transaction ID: 4B10317.E25930 Date of Disbursement
	Mailing Address 2610 West Oaktin Street		11 M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Park Ridge IL	60068	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E25931 Date of Disbursement
D.	Zenn James		M M / D D / Y Y Y
	Mailing Address 2610 West Oaktin Street		11 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Park Ridge IL	60068	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organization Na Hamilton Charlotte	ame	Transaction ID: 4B10317.E25936 Date of Disbursement
	Mailing Address 204 Peabody Drive		11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional)		0.00

_	COUEDING L. D. (EEO E OV)			
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 512 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page	4a 4c x 5
	OF LEVIN FUNDS		Aggregation rage	4b 4d 4d 5
	any Information copied from such Reports and State or for commercial purposes, other than using the nar			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Orgar Hamilton Charlotte	nization Na	me	Transaction ID: 4B10317.E25937 Date of Disbursement
	Mailing Address 204 Peabody Drive			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Orgar Hamilton Charlotte	nization Na	ame	Transaction ID: 4B10317.E25938 Date of Disbursement
	Mailing Address 204 Peabody Drive			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Orgar Hamilton Charlotte	nization Na	ame	Transaction ID: 4B10317.E25939 Date of Disbursement
	Mailing Address 204 Peabody Drive			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Orgar Hamilton Charlotte	nization Na	me	Transaction ID: 4B10317.E26265 Date of Disbursement
	Mailing Address 204 Peabody Drive			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Orgar Hamilton Charlotte	nization Na	ame	Transaction ID: 4B10317.E26266 Date of Disbursement
	Mailing Address 204 Peabody Drive			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Champaign	IL	61820	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
Γ	SUBTOTAL of Disbursements This Page (optional	)		0.00

	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 513 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements ma r for commercial purposes, other than using the name and ac		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization N Hamilton Charlotte	ame	Transaction ID: 4B10317.E26267 Date of Disbursement
	Mailing Address 204 Peabody Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Hamilton Charlotte	ame	Transaction ID: 4B10317.E26268 Date of Disbursement
	Mailing Address 204 Peabody Drive		11 0 2 7 2 0 1 0
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization N Liberatore Amanda	ame	Transaction ID: 4B10317.E25940 Date of Disbursement
	Mailing Address 102 East Green Street, Apt#18		11 M M / D D / Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E26282
D.	Klootwyk Kristen	a	Date of Disbursement
	Mailing Address 211 East John Street, Apt#208		11 M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E26283
E.	Klootwyk Kristen	arro	Date of Disbursement
	Mailing Address 211 East John Street, Apt#208		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	CURTOTAL of Diabura amonto This David (anticant)		
- 1	SUBTOTAL of Disbursements This Page (optional)		0.00

_	COUEDINE L. D. (EEO Es OV)		
	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 514 / 534 (check only one)
ľ	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	
(	OF LEVIN FUNDS	Aggregation rage	4a   4c   15 4b   4d
	Any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ad		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Klootwyk Kristen	ame	Transaction ID: 4B10317.E25952 Date of Disbursement
	Mailing Address 211 East John Street, Apt#208		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Klootwyk Kristen	ame	Transaction ID: 4B10317.E25953 Date of Disbursement
	Mailing Address 211 East John Street, Apt#208		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Na Klootwyk Kristen	ame	<b>Transaction ID:</b> 4B10317.E25954 Date of Disbursement
	Mailing Address 211 East John Street, Apt#208		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	61820	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Bazzanelia Alyssa	ame	<b>Transaction ID:</b> 4B10317.E26328 Date of Disbursement
	Mailing Address 318 Kensington		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Lagrange	60525	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization Na	ama	Transaction ID: 4B10317.E26329
E.	Bazzanelia Alyssa	u I I C	Date of Disbursement
	Mailing Address 318 Kensington		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Lagrange	60525	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
r	SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b> 0.00

,	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 515 / 534
ı	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5
	Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name			son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organiza Bazzanelia Alyssa	ation Na	me	Transaction ID: 4B10317.E26006 Date of Disbursement
	Mailing Address 318 Kensington			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	tate L	Zip Code 60525	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organiza Bazzanelia Alyssa	ation Na	me	Transaction ID: 4B10317.E26007 Date of Disbursement
	Mailing Address 318 Kensington			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	,	tate L	Zip Code 60525	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organiza Bazzanelia Alyssa	ation Na	me	Transaction ID: 4B10317.E26008 Date of Disbursement
	Mailing Address 318 Kensington			M M / D D / Y Y Y Y Y
	,	state	Zip Code	Amount of Each Disbursement this Period
		L	60525	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organiza Joseph Jerry	ation Na	me	Transaction ID: 4B10317.E26012 Date of Disbursement
	Mailing Address 509 East Green Street			M M / D D / Y Y Y Y Y
	•	state	Zip Code	Amount of Each Disbursement this Period
	<b> - 3</b>	L	61820	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organiza Joseph Jerry	ation Na	me	Transaction ID: 4B10317.E26013 Date of Disbursement
	Mailing Address 509 East Green Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		tate	Zip Code	Amount of Each Disbursement this Period
	1 9	L	61820	20.00
-	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
1	SUBTOTAL of Disbursements This Page (optional)			0.00

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S	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 516 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS		Aggregation Page	4a 4c 1x 5
	ny Information copied from such Reports and Statemer r for commercial purposes, other than using the name a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organizat Joseph Jerry	ion Na	me	Transaction ID: 4B10317.E26332 Date of Disbursement
	Mailing Address 509 East Green Street			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City St Champaign IL	ate	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organizat	ion Na	me	Transaction ID: 4B10317.E26333
В.	Joseph Jerry			Date of Disbursement
	Mailing Address 509 East Green Street			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	•	ate	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	-	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organizat Gaily Katherine	ion Na	me	Transaction ID: 4B10317.E26015 Date of Disbursement
	Mailing Address 508 East Chalmers			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	,	ate	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	-	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organizat Gaily Katherine	ion Na	me	Transaction ID: 4B10317.E26016 Date of Disbursement
	Mailing Address 508 East Chalmers			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	•	ate	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	-	61820	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Е.	Full Name (Last, First, Middle Initial) / Full Organizat	ion Na	me	Transaction ID: 4B10317.E26017 Date of Disbursement
	Gaily Katherine  Mailing Address 508 East Chalmers			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	· · ·	ate	Zip Code	Amount of Each Disbursement this Period
	Champaign IL	-	61820	20.00
<b>—</b>	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			0.00

ımaç	ge# 11990327212		
П	CHEDULE L-B (FEC Form 3X) FEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 517 / 534 (check only one)
	ny Information copied from such Reports and Statements market for commercial purposes, other than using the name and accommendations.		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Gaily Katherine	lame	Transaction ID: 4B10317.E26018 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 508 East Chalmers		11 01 2010
	CityStateChampaignIL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization N Gaily Katherine	lame	Transaction ID: 4B10317.E26019 Date of Disbursement
	Mailing Address 508 East Chalmers		111 01 7 2010
	City State Champaign IL	Zip Code 61820	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Enriquez Pamela	lame	Transaction ID: 4B10317.E26020 Date of Disbursement
	Mailing Address 2245 Iroquis Road		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Champaign IL	Zip Code 60091	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Enriquez Pamela	lame	Transaction ID: 4B10317.E26021 Date of Disbursement
	Mailing Address 2245 Iroquis Road		11 M M / D D / Y Y Y Y Y Y
	City State Champaign IL	Zip Code 60091	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	00031	Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization N Enriquez Pamela	lame	Transaction ID: 4B10317.E26022 Date of Disbursement
	Mailing Address 2245 Iroquis Road		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Champaign IL  Purpose of Disbursement	60091	20.00
_	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00

0.00

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٤	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 518 / 534
ľ	TEMIZED DISBURSEMENTS		for each category of the	(check only one)
	OF LEVIN FUNDS		Aggregation Page	4a 4c x 5
_	Any Information copied from such Reports and Statements	mav	not be sold or used by any pe	4b 4d
	r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full)			
را.	Illinois Republican Party			
Z	Full Name (Land First Middle Letter) / Full Our selection			Transaction ID: 4B10317.E26037
A.	Full Name (Last, First, Middle Initial) / Full Organization Bauer Chris	i inam	ne	Date of Disbursement
				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2160 Vachel Lindsay Dr			11 01 2010
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62703	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nan	ne	Transaction ID: 4B10317.E26038
В.	Nettels Latrine			Date of Disbursement
	Mailing Address 1536 Sven Pines Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	)	Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62704	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	ne	<b>Transaction ID:</b> 4B10317.E26041
C.	Sneed Mary			Date of Disbursement
	Mailing Address 3205 Saxony Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
				Amount of Each Disbursement this Period
	City State	)	Zip Code	
	Springfield IL		62703	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card			Account: LEVIN
_				[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization	n Nam	ne	Transaction ID: 4B10317.E26042 Date of Disbursement
٥.	Sneed Mary			M M / D D / Y Y Y Y
	Mailing Address 3205 Saxony Rd			11 01 2010
	City State	<u> </u>	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	•	62703	20.00
	Purpose of Disbursement			Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization	. Nan	20	Transaction ID: 4B10317.E26043
E.	Sneed Mary	iivaii	16	Date of Disbursement
	Mailing Address 3205 Saxony Rd			11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 3203 Saxony nu			11 01 2010
	City State	;	Zip Code	Amount of Each Disbursement this Period
	Springfield IL		62703	20.00
	Purpose of Disbursement			Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
r	SUBTOTAL of Disbursements This Page (optional)			0.00
- 1	and the second of the second o			0.00

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	CHEDULE L-B (FEC Form 3X) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 519 / 534 (check only one)
C	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ad		rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Sneed Mary	ame	Transaction ID: 4B10317.E26044 Date of Disbursement
	Mailing Address 3205 Saxony Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Sneed Mary	ame	Transaction ID: 4B10317.E26348 Date of Disbursement
	Mailing Address 3205 Saxony Rd	11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City State Springfield IL	Zip Code 62703	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>с</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Egiizi Joan	ame	Transaction ID: 4B10317.E26355 Date of Disbursement
	Mailing Address 2823 Dryden		1 1 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62711	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Na Egiizi Joan	ame	Transaction ID: 4B10317.E26356 Date of Disbursement
	Mailing Address 2823 Dryden		111 D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62711	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organization Na Egiizi Joan	ame	Transaction ID: 4B10317.E26051 Date of Disbursement
	Mailing Address 2823 Dryden		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Springfield IL	Zip Code 62711	Amount of Each Disbursement this Period
	Purpose of Disbursement	02/11	20.00
<b>—</b>	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)		0.00

0.00

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S	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 520 / 534
П	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
(	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	ny Information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson for the purpose of soliciting contributions
OI	for commercial purposes, other than using the name and ad	dress of any political committee	to solicit contributions from such committee
$\setminus$	NAME OF COMMITTEE (In Full)		
	Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization Na Egiizi Joan	ame	Transaction ID: 4B10317.E26052 Date of Disbursement
	Mailing Address 2823 Dryden		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62711	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Egiizi Joan	ame	Transaction ID: 4B10317.E26053 Date of Disbursement
	Mailing Address 2823 Dryden		1 1 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			11 11 11
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield IL	62711	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26055
C.	Boyd Dave		Date of Disbursement
	Mailing Address 2230 Lindbergh		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26056
D.	Boyd Dave		Date of Disbursement
	Mailing Address 2230 Lindbergh		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26057
E.	Boyd Dave		Date of Disbursement
	Mailing Address 2230 Lindbergh		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)		0.00
- [ ]	222 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		0.00

,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 521 / 534
ı	TEMIZED DISBURSEMENTS	for each category of the	(check only one)
	OF LEVIN FUNDS	Aggregation Page	4a 4c x 5
_	Any Information copied from such Reports and Statements m	av not be sold or used by any pe	4b 4d
	or for commercial purposes, other than using the name and a		
N	NAME OF COMMITTEE (In Full)		
1	Illinois Republican Party		
Z	Full Name (Least First Middle Letter) / Full Our selection	1	Transaction ID: 4B10317.E26357
A.	Full Name (Last, First, Middle Initial) / Full Organization N Boyd Dave	iame	Date of Disbursement
			1 1 0 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2230 Lindbergh		11 02 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E26358
В.	Boyd Dave		Date of Disbursement
	Mailing Address 2230 Lindbergh		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Springfield, IL	62704	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	lame	<b>Transaction ID:</b> 4B10317.E26072
C.	Spitz Anne		Date of Disbursement
	Mailing Address 13552 Niggli Rd		11
	- <del> </del>		Amount of Each Disbursement this Period
	City State	Zip Code	
	Pocahontas IL	62275	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
_			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N	lame	Transaction ID: 4B10317.E26073 Date of Disbursement
٥.	Meikamp Jo		M M / D D / Y Y Y Y
	Mailing Address 1370 Geiber Rd		11 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Edwardsville IL	62025	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
-	Full Name (Last, First, Middle Initial) / Full Organization N	lama	Transaction ID: 4B10317.E26074
E.	Doncarlos Sue	iane	Date of Disbursement
			1 1 0 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 2406 Patrick Drive		11 01 2010
	City State	Zip Code	Amount of Each Disbursement this Period
	Belleville IL	62221	20.00
	Purpose of Disbursement		Account: LEVIN
	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
r	SUBTOTAL of Disbursements This Page (optional)		0.00
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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 522 / 534 (check only one)
	TEMIZED DISBURSEMENTS OF LEVIN FUNDS		for each category of the Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and Statements in r for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Hurt Jim	Name	9	Transaction ID: 4B10317.E26076 Date of Disbursement
	Mailing Address 2922 Woodland Ln			11 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Marine IL  Purpose of Disbursement		Zip Code 62061	Amount of Each Disbursement this Period 20.00
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Hurt Jim	Name	)	<b>Transaction ID:</b> 4B10317.E26077 Date of Disbursement
	Mailing Address 2922 Woodland Ln			111 / 01 / 2010
	City State Marine IL		Zip Code 62061	Amount of Each Disbursement this Period
	Marine IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		02001	Account: LEVIN [MEMO ITEM]
<b>-</b> с.	Full Name (Last, First, Middle Initial) / Full Organization	Name	)	Transaction ID: 4B10317.E26385 Date of Disbursement
	Hurt Jim  Mailing Address 2922 Woodland Ln			11 1 D D Y 2 0 1 0 Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Marine IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		62061	Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Kuehl Amy	Name	9	Transaction ID: 4B10317.E26078 Date of Disbursement
	Mailing Address 1415 Lynn St.			1 1 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Highland IL		Zip Code 62249	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
<b>—</b> Е.	Full Name (Last, First, Middle Initial) / Full Organization Kuehl Amy	Name	9	Transaction ID: 4B10317.E26079 Date of Disbursement
	Mailing Address 1415 Lynn St.			11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Highland IL		Zip Code 62249	Amount of Each Disbursement this Period 20.00
•	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
	SUBTOTAL of Disbursements This Page (optional)			▶ 0.00

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	CHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 523 / 534 (check only one)
П	TEMIZED DISBURSEMENTS	for each category of the Aggregation Page	4a 4c x 5
C	OF LEVIN FUNDS	Aggregation rage	4b 4d 5
	ny Information copied from such Reports and Statements ma for commercial purposes, other than using the name and ac		
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
Α.	Full Name (Last, First, Middle Initial) / Full Organization N Denhe Ruth	ame	Transaction ID: 4B10317.E26084 Date of Disbursement
	Mailing Address 8 Cherrywood Ct		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Belleville IL	62221	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name /Least First Middle Initially / Full Ownerinstics N		Transaction ID: 4B10317.E26085
В.	Full Name (Last, First, Middle Initial) / Full Organization N Fuerguson Wendy	ame	Date of Disbursement
	Mailing Address 464 Hamilton		1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Woodriver IL	62095	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization N Jones Donna	ame	Transaction ID: 4B10317.E26086 Date of Disbursement
	Mailing Address 4010 Vesei		M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Granite City IL	62040	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization N Killion Sally	ame	Transaction ID: 4B10317.E26089 Date of Disbursement
	Mailing Address 5 Doug Dr		111
	City State	Zip Code	Amount of Each Disbursement this Period
	St.jacob IL	62281	20.00
	Purpose of Disbursement		Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization N Whimmer Kathy	ame	Transaction ID: 4B10317.E26091 Date of Disbursement
	Mailing Address 300 Paddock Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Belleville IL	Zip Code 62223	Amount of Each Disbursement this Period
	Purpose of Disbursement	UZZZJ	20.00
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
Γ,	SURTOTAL of Dichureamenta This Daga (antional)		
13	SUBTOTAL of Disbursements This Page (optional)		0.00

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П	CHEDULE L-B (FEC Form 3X) EMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: PAGE 524 / 534 (check only one)
Ai	ny Information copied from such Reports and Statements refor commercial purposes, other than using the name and a		
	NAME OF COMMITTEE (In Full)  Illinois Republican Party	, , , , , , , , , , , , , , , , , , ,	
Α.	Full Name (Last, First, Middle Initial) / Full Organization Buehler Adam	Name	Transaction ID: 4B10317.E26096 Date of Disbursement
	Mailing Address 315 Las Olas		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	CityStateBellevilleIL	Zip Code 62221	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Buehler Adam	Name	Transaction ID: 4B10317.E26381 Date of Disbursement
	Mailing Address 315 Las Olas		11 02 7 2010
	City State Belleville IL	Zip Code 62221	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization Tourneer Charlotte	Name	Transaction ID: 4B10317.E26401 Date of Disbursement
	Mailing Address 2065 College		1 1 D D / Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Tourneer Charlotte	Name	Transaction ID: 4B10317.E26402 Date of Disbursement
	Mailing Address 2065 College		111 D D / Y Y Y Y Y
	City State Quincy IL	Zip Code	Amount of Each Disbursement this Period
	Quincy IL  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card	62301	Account: LEVIN [MEMO ITEM]
<u> </u>	Full Name (Last, First, Middle Initial) / Full Organization Tourneer Charlotte	Name	Transaction ID: 4B10317.E26109 Date of Disbursement
	Mailing Address 2065 College		1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL Purpose of Disbursement	62301	Account: LEVIN
<b>—</b>	Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]
5	SUBTOTAL of Disbursements This Page (optional)		0.00

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,	SCHEDULE L-B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 525 / 534
ľ	TEMIZED DISBURSEMENTS	for each category of the	(check only one)  4a 4c x 5
(	OF LEVIN FUNDS	Aggregation Page	4a 4c 4x 5
	any Information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac		son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization National Tourneer Charlotte	ame	Transaction ID: 4B10317.E26110 Date of Disbursement
	Mailing Address 2065 College		11 M M / D D / Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN [MEMO ITEM]
_			-
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Tourneer John	ame	Transaction ID: 4B10317.E26111 Date of Disbursement
	Mailing Address 2065 College		1 1 0 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement  Memo: Generic Goty Incent Gift Card		Account: LEVIN
_	Memo. Generic Goty incent Girt Card		[MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organization No Tourneer John	ame	Transaction ID: 4B10317.E26112 Date of Disbursement
	Mailing Address 2065 College		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame	Transaction ID: 4B10317.E26403
D.	Tourneer John		Date of Disbursement  M M / D D / Y Y Y Y
	Mailing Address 2065 College		M M / D D / Y Y Y Y Y
	City State	Zip Code	Amount of Each Disbursement this Period
	Quincy IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
_	Full Name (Last, First, Middle Initial) / Full Organization N	ame.	Transaction ID: 4B10317.E26404
E.	Tourneer John		Date of Disbursement
	Mailing Address 2065 College		1 1 D D / Y Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement	02001	
	Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
۲	SUBTOTAL of Disbursements This Page (optional)		
- 1	SUDITION DISSUITS CITIES 1 age (optional)		0.00

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	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 526 / 534 (check only one)
	TEMIZED DISBURSEMENTS OF LEVIN FUNDS		for each category of the Aggregation Page	4a 4c x 5
	ny Information copied from such Reports and State	ements ma	y not be sold or used by any per	yson for the purpose of soliciting contributions
0	for commercial purposes, other than using the na	me and ad	dress of any political committee	to solicit contributions from such committee
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organ Bland James	nization Na	ame	Transaction ID: 4B10317.E26113 Date of Disbursement
	Mailing Address 832 N 2800 Th Ave			
	City	State	Zip Code	Amount of Each Disbursement this Period
	Mendon Purpose of Disbursement	IL	62351	20.00
	Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ	nization Na	ame	Transaction ID: 4B10317.E26114 Date of Disbursement
	Mailing Address 832 N 2800th Ave			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Mendon	IL	62351	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organ	nization Na	ame	Transaction ID: 4B10317.E26115 Date of Disbursement
	Mailing Address 7004 White Oak Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Quincy	IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Geise Sharon	nization Na	ame	Transaction ID: 4B10317.E26116 Date of Disbursement
	Mailing Address 3222 Center Dr			1 1 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Quincy	IL	62301	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Ε.	Full Name (Last, First, Middle Initial) / Full Organ Goodwin Susan	nization Na	ame	Transaction ID: 4B10317.E26117 Date of Disbursement
	Mailing Address 3820 S 24th			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Quincy	IL	62305	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
Γ,	SUBTOTAL of Disbursements This Page (optional	)		0.00

Mailing Address 1101 N Madison  City State Zip Code Marion IL 62959  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name Maloy April  Marion IL 62959  Full Name (Last, First, Middle Initial) / Full Organization Name Marion IL 62959  City State Zip Code Marion IL 62959  Purpose of Disbursement Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E26140  Date of Disbursement In Mailing Address 1101 N Madison  City State Zip Code Amount of Each Disbursement this Perion Marion IL 62959  Full Name (Last, First, Middle Initial) / Full Organization Name Maloy April  Mailing Address 1101 N Madison  City State Zip Code Marion ID: 4B10317.E26165  Date of Disbursement  Mailing Address 1101 N Madison  Transaction ID: 4B10317.E26165  Date of Disbursement In Mailing Address 1101 N Madison  Amount of Each Disbursement In Mailing Address 1101 N Madison  Amount of Each Disbursement In Mailing Amount of Each Disbursement In Perion Marion IL 62959  Amount of Each Disbursement In Perion In Mailing Amount of Each Disbursement In Perion In Mailing Amount of Each Disbursement In Perion In I	4
OF LEVIN FUNDS  Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee  NAME OF COMMITTEE (in Full)  Illinois Republican Party  A. Full Name (Last, First, Middle Initial) / Full Organization Name  Maloy April  Marion  City  Marion  Purpose of Disbursement  Maloy April  Mailing Address  1101 N Madison  City  State  Zip Code  Marion  IL  62959  Account: LEVIN  Maling Address  1101 N Madison  Transaction ID: 4B10317.E26139  Date of Disbursement this Peri  Macount: LEVIN  Maloy April  Mailing Address  1101 N Madison  Transaction ID: 4B10317.E26140  Date of Disbursement  M M M M M M M M M M M M M M M M M M M	+
Any Information copied from such Reports and Statements may not be sold or used by any person for the purposes of soliciting contributions from such committee  Any Information copied from such Reports and Statements may not be sold or used by any person for the purposes of soliciting contributions from such committee  NAME OF COMMITTEE (In Full)  Illinois Republican Party  Full Name (Last, First, Middle Initial) / Full Organization Name  A. Hall Name (Last, First, Middle Initial) / Full Organization Name  Maling Address 1101 N Madison  City State Zip Code Amount of Each Disbursement this Perium Maloy April  Maloy Ceneric Gotv Incent Gift Card  City State Zip Code  Marion IL 62959  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  City State Zip Code  Marion IL 62959  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  C. Full Name (Last, First, Middle Initial) / Full Organization Name  Maloy April  Maling Address 1101 N Madison  City State Zip Code  Marion IL 62959  City State Zip Code  Marion IL 62959  Amount of Each Disbursement this Perius Periu	
Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full)    NAME OF COMMITTEE (In Full)	
A. Full Name (Last, First, Middle Initial) / Full Organization Name  Maloy April  Mailing Address 1101 N Madison  City State Zip Code Marion IL 62959  B. Full Name (Last, First, Middle Initial) / Full Organization Name  Maloy April  B. Full Name (Last, First, Middle Initial) / Full Organization Name  Maloy April  City State Zip Code Marion IL 62959  Full Name (Last, First, Middle Initial) / Full Organization Name  Maloy April  City State Zip Code Marion IL 62959  Purpose of Disbursement  Maling Address 1101 N Madison  City State Zip Code Marion IL 62959  Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  Full Name (Last, First, Middle Initial) / Full Organization Name  Maloy April  Maling Address 1101 N Madison  City State Zip Code Marion ID: 4B10317.E26165  Date of Disbursement  Memo: Generic Gotv Incent Gift Card  Transaction ID: 4B10317.E26165  Date of Disbursement  Maloy April  Mailing Address 1101 N Madison  City State Zip Code Amount of Each Disbursement  Maloy April  Maling Address 1101 N Madison  City State Zip Code Amount of Each Disbursement This Pering Amount of Each Disbursement  Maloy April  Maloy April  Maling Address 1101 N Madison  City State Zip Code Amount of Each Disbursement This Pering Amount of	
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Malloy April  Mailing Address 1101 N Madison  City State Zip Code Marion IL 62959  Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
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Memo: Generic Gotv Incent Gift Card [MEMO ITEM]	
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Memo: Generic Gotv Incent Gift Card [MEMO ITEM]	
Full Name (Last, First, Middle Initial) / Full Organization Name  Transaction ID: 4B10317.E26141	
E. Melfi Laura Date of Disbursement	
Mailing Address Po Box 423	1
City State Zip Code Amount of Each Disbursement this Peri Cambria IL 62915 20.00	od
Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card  Account: LEVIN  [MEMO ITEM]	
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	SCHEDULE L-B (FEC Form 3X)		Jse separate schedule(s)	FOR LINE NUMBER: PAGE 528 / 534 (check only one)
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	any Information copied from such Reports and Statements r r for commercial purposes, other than using the name and a			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Organization Smith Courtney	Name		Transaction ID: 4B10317.E26151 Date of Disbursement
	Mailing Address 329 E Gaskins St			M M / D D / Y Y Y Y Y
	City State Harrisburg IL Purpose of Disbursement		Zip Code 62946	Amount of Each Disbursement this Period 20.00  Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Smith Courtney	Name		Transaction ID: 4B10317.E26152 Date of Disbursement
	Mailing Address 329 E Gaskins St			11
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL Purpose of Disbursement		62946	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Smith Courtney	Name		Transaction ID: 4B10317.E26153 Date of Disbursement
	Mailing Address 329 E Gaskins St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL Purpose of Disbursement		62946	Account: LEVIN
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organization Smith Courtney	Name		<b>Transaction ID:</b> 4B10317.E26154 Date of Disbursement
	Mailing Address 329 E Gaskins St			M M / D D / Y Y Y Y Y Y
	City State		Zip Code	Amount of Each Disbursement this Period
	Harrisburg IL Purpose of Disbursement		62946	Account: LEVIN
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organization Wojciechowski Daniel	Name		Transaction ID: 4B10317.E26159 Date of Disbursement
	Mailing Address Po Box 684			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Cambria IL		Zip Code 62915	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		02010	Account: LEVIN [MEMO ITEM]
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	OUEDINE L. D. (EEO Es was OV)						
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 529 / 534 (check only one)			
ľ	TEMIZED DISBURSEMENTS		for each category of the Aggregation Page				
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	Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee						
	NAME OF COMMITTEE (In Full) Illinois Republican Party						
Α.	Full Name (Last, First, Middle Initial) / Full Organization Krueger Mary Ann	Nam	ne	Transaction ID: 4B10317.E26203 Date of Disbursement			
	Mailing Address 22 Courleroux			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City State		Zip Code	Amount of Each Disbursement this Period			
	Palos Hills IL		60465	20.00			
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]			
В.	Full Name (Last, First, Middle Initial) / Full Organization Veenstra Richard	Nam	ne	Transaction ID: 4B10317.E26225 Date of Disbursement			
	Mailing Address 201 N Catalpa			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City State		Zip Code	Amount of Each Disbursement this Period			
	Addison IL		60101	20.00			
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]			
C.	Full Name (Last, First, Middle Initial) / Full Organization Soch Ray	Nam	ne	Transaction ID: 4B10317.E26227 Date of Disbursement			
	Mailing Address 2132 Ruby St.			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City State		Zip Code	Amount of Each Disbursement this Period			
	Melrose Park IL		60164	20.00			
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]			
D.	Full Name (Last, First, Middle Initial) / Full Organization Soch Ray	Nam	ne	Transaction ID: 4B10317.E26228 Date of Disbursement			
	Mailing Address 2132 Ruby St.			1 1 M M / D D / Y Y Y Y Y Y			
	City State		Zip Code	Amount of Each Disbursement this Period			
	Melrose Park IL		60164	20.00			
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]			
E.	Full Name (Last, First, Middle Initial) / Full Organization Soch Ray	Nam	ne	Transaction ID: 4B10317.E26229 Date of Disbursement			
	Mailing Address 2132 Ruby St.			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City State		Zip Code	Amount of Each Disbursement this Period			
	Melrose Park IL		60164	20.00			
	Purpose of Disbursement			Account: LEVIN			
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S	CHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 530 / 534
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	ny Information copied from such Reports and Stat for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full)  Illinois Republican Party			
Α.	Full Name (Last, First, Middle Initial) / Full Orga Soch Ray	ınization Na	ame	Transaction ID: 4B10317.E26230 Date of Disbursement
	Mailing Address 2132 Ruby St.			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Amount of Each Disbursement this Period
	Melrose Park	IL	60164	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Orga Soch Ray	nization Na	ame	Transaction ID: 4B10317.E26231 Date of Disbursement
	Mailing Address 2132 Ruby St.			11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Melrose Park	IL	60164	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Orga Soch Ray	nization Na	ame	Transaction ID: 4B10317.E26232 Date of Disbursement
	Mailing Address 2132 Ruby St.			M M / D D / Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Melrose Park	IL	60164	20.00
	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Orga Soch Ray	ınization Na	ame	<b>Transaction ID:</b> 4B10317.E26233 Date of Disbursement
	Mailing Address 2132 Ruby St.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Melrose Park	IL	60164	20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Orga Gaeta Jon	ınization Na	ame	Transaction ID: 4B10317.E26234 Date of Disbursement
	Mailing Address 118 Monroe			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Amount of Each Disbursement this Period
	Normal	IL	61761	20.00
_	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
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_	OUEDINE L. D. (FEO. Farma OV)							
	SCHEDULE L-B (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 531 / 534 (check only one)				
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	Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee							
	NAME OF COMMITTEE (In Full) Illinois Republican Party							
A.	Full Name (Last, First, Middle Initial) / Full Organiz Metroff Victor	zation Na	me	Transaction ID: 4B10317.E26236 Date of Disbursement				
	Mailing Address 804 S. 7th Ave			M M / D D / Y Y Y Y Y Y				
	City	State	Zip Code	Amount of Each Disbursement this Period				
	Lagrange	IL	60525	20.00				
	Purpose of Disbursement			Account: LEVIN				
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]				
В.	Full Name (Last, First, Middle Initial) / Full Organia Morris Jordan	zation Na	me	Transaction ID: 4B10317.E26237 Date of Disbursement				
	Mailing Address 2403 Peppertree Place			111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Amount of Each Disbursement this Period				
	Champaign	IL	61822	20.00				
	Purpose of Disbursement			Account: LEVIN				
	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]				
c.	Full Name (Last, First, Middle Initial) / Full Organiz Lastres Caitlin	zation Na	me	Transaction ID: 4B10317.E26238 Date of Disbursement				
	Mailing Address 1003 N School St			M M / D D / Y Y Y Y Y				
	City	State	Zip Code	Amount of Each Disbursement this Period				
	Normal	IL	61761	20.00				
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]				
D.	Full Name (Last, First, Middle Initial) / Full Organia	zation Na	me	Transaction ID: 4B10317.E26241 Date of Disbursement				
	Mailing Address 117 W. Willow Apt 1			111 D D / Y Y Y Y Y				
	City	State	Zip Code	Amount of Each Disbursement this Period				
	Normal	IL	61761	20.00				
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]				
_	Full Name (Last, First, Middle Initial) / Full Organia	zation Na	ıme	Transaction ID: 4B10317.E26244				
E.	Mattheessen John		· ·	Date of Disbursement				
	Mailing Address 2007 Desoto Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Amount of Each Disbursement this Period				
	Pekin	IL	61554	20.00				
	Purpose of Disbursement			Account: LEVIN				
_	Memo: Generic Gotv Incent Gift Card			[MEMO ITEM]				
Γ	SUBTOTAL of Disbursements This Page (optional)			0.00				

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S	CHEDULE L-B (FEC Form 3X)			FOR LINE NUMBER: PAGE 532 / 534
	TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only one)
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	ny Information copied from such Reports and Stater r for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) Illinois Republican Party			
A.	Full Name (Last, First, Middle Initial) / Full Organ Kubic Andrew	Transaction ID: 4B10317.E26245 Date of Disbursement		
	Mailing Address 138 E Beaufort St			111 D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Normal	State IL	Zip Code 61761	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organ Anderson Adrienne	ization Na	ıme	Transaction ID: 4B10317.E26252 Date of Disbursement
	Mailing Address 705 S. Franklin Apt 3			111 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Normal	State IL	Zip Code 61761	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
c.	Full Name (Last, First, Middle Initial) / Full Organ Kubic Dave	ization Na	me	Transaction ID: 4B10317.E26257 Date of Disbursement
	Mailing Address 138 E. Beaufort St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Normal	State IL	Zip Code 61761	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
D.	Full Name (Last, First, Middle Initial) / Full Organ Jeffries Gina	ization Na	me	Transaction ID: 4B10317.E26258 Date of Disbursement
	Mailing Address 108 Nicholas Rd			M M / D D / Y Y Y Y Y Y
	City Groveland	State IL	Zip Code 61535	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN [MEMO ITEM]
E.	Full Name (Last, First, Middle Initial) / Full Organ Call Lindsay	Transaction ID: 4B10317.E26259 Date of Disbursement		
	Mailing Address 602 Hillview Dr Apt 5			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Normal	State	Zip Code 61761	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card			Account: LEVIN

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	NAME OF COMMITTEE (In Full)  Illinois Republican Party		
A.	Full Name (Last, First, Middle Initial) / Full Organization Na Musolino Jim	ame	Transaction ID: 4B10317.E26405 Date of Disbursement
	Mailing Address 1225 S 18th St		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
В.	Full Name (Last, First, Middle Initial) / Full Organization Na Dooley Cheryl	ame	Transaction ID: 4B10317.E26406 Date of Disbursement
	Mailing Address 426 Pinehurst Dr		11 02 7 2010
	City State Quincy IL	Zip Code 62301	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) / Full Organization Na Miller Daniel	ame	Transaction ID: 4B10317.E26407 Date of Disbursement
	Mailing Address P.o. Box 81		111 02 7 2010
	City State Buffalo IL	Zip Code 62515	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
<b>D</b> .	Full Name (Last, First, Middle Initial) / Full Organization Na Miller Daniel	Transaction ID: 4B10317.E26408 Date of Disbursement	
	Mailing Address P.o. Box 81		11 M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Buffalo IL	Zip Code 62515	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Memo: Generic Gotv Incent Gift Card	02010	Account: LEVIN [MEMO ITEM]
 E.	Full Name (Last, First, Middle Initial) / Full Organization Na	ame	Transaction ID: 4B10317.E26409 Date of Disbursement
	Mailing Address P.o. Box 81		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City State	Zip Code	Amount of Each Disbursement this Period
	Buffalo IL	62515	20.00
_	Purpose of Disbursement  Memo: Generic Gotv Incent Gift Card		Account: LEVIN [MEMO ITEM]
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SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS	Use separate schedule(s) for each category of the Aggregation Page	FOR LINE NUMBER: (check only one)  4a 4c x 5 4b 4d			
Any Information copied from such Reports and Statements or for commercial purposes, other than using the name and					
NAME OF COMMITTEE (In Full) Illinois Republican Party					
Full Name (Last, First, Middle Initial) / Full Organization Postle Bernadette	Name	Transaction ID: 4B10317.E26410 Date of Disbursement			
Mailing Address 928 N 230th Ave		111 02 7 2010			
City State	Zip Code	Amount of Each Disbursement this Period			
Quincy	62305	20.00			
Purpose of Disbursement		Account: LEVIN			
Memo: Generic Gotv Incent Gift Card		[MEMO ITEM]			

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	0.00
TOTAL This Period (last page this line number only)	•	54566.76